

# BUCKINGHAMSHIRE COUNTY COUNCIL




# ANNUAL REPORT

*of the*

*County Medical Officer of Health*

*for the Year*

**1962**



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County Health Department,  
County Offices,  
Aylesbury.  
May, 1963.

Mr. Chairman, Ladies and Gentlemen,

This report has been prepared with the need again in mind that it has to fulfil a dual purpose; it must contain, for those who read it for professional reasons, detailed information which they require and which they expect to be able to extract with the minimum of difficulty; on the other hand, it should be interesting and readable to the growing body of people outside the department who give us so much help and who show increasing interest in our work.

The growing demand for the report, to me, is encouraging and is to be considered as a valued extension of our health education activities.

The health and welfare services continued to expand during 1962 although shortages of trained staff, particularly of nursing staff, made it difficult to gear the growth to the rapid rise in the population of the County.

I would like, once again, Mr. Chairman, to say how grateful I am to you and to members of the County Health Committee for your continued support and help, to thank members of voluntary associations for their invaluable assistance and to say a sincere "thank you" to all members of the staff for their good work throughout the year.

I am,

Your obedient Servant,

G. W. H. TOWNSEND,

*County Medical Officer.*

## PUBLIC HEALTH OFFICERS OF THE AUTHORITY

### (a) Whole-time Officers of the County Council

#### *County Medical Officer of Health:*

G. W. H. TOWNSEND, C.B.E., B.A., M.B., B.CH., D.P.H.

#### *Deputy:*

G. W. KNIGHT, M.D., CH.B., D.P.H. (*Resigned 30/9/62*)

J. DRUMMOND, M.B., CH.B., D.P.H. (*Commenced 1/3/63*)

#### *Area Medical Officers:*

M. A. CHARRETT, M.R.C.S., L.R.C.P., D.P.H.

(Also Medical Officer of Health Borough of Slough)

A. J. MUIR, M.B., CH.B., B.H.Y., D.P.H.

(Also Medical Officer of Health Borough of High Wycombe, Urban District of Marlow and Rural District of Wycombe)

A. W. PRINGLE, B.A., M.B., B.CH., B.A.O., D.P.H.

(Also Medical Officer of Health Borough of Aylesbury, Urban District of Linslade, Rural Districts of Aylesbury and Wing)

D. H. WALDRON, O.B.E., M.D., B.CH., B.A.O., D.P.H., D.T.M., & H.

(Also Medical Officer of Health Borough of Buckingham, Urban Districts of Bletchley, Newport Pagnell and Wolverton, Rural Districts of Buckingham, Newport Pagnell and Winslow)

#### *Senior Medical Officers:*

PATRICIA HERDMAN, M.B., B.S., D.P.H.

FANNY STANG, M.D., L.R.C.P., D.P.H.

#### *Assistant County Medical Officers:*

INEZ R. ALDOUS, M.B., B.CH., D.C.H.

R. E. ATKINSON, M.B., CH.B., D.P.H.

(Also Medical Officer of Health Urban Districts of Beaconsfield and Chesham and Rural District of Amersham)

B. H. BURNE, M.R.C.S., L.R.C.P., D.P.H.

(Senior Assistant)

P. E. DOYLE, M.B., B.CH., D.A.O., D.A., D.P.H.

MARIE J. FREEMAN, M.B., B.S.

JOAN GRAY, M.B., CH.B., D.P.H.

G. M. HOBBS, B.COM., M.B., CH.B., D.P.H.

(Also Medical Officer of Health Urban District of Eton and Rural District of Eton)

HANNAH V. ILLING, M.B., CH.B.

ETHEL G. JENNINGS, M.A., M.B., B.CH., B.A.O., D.P.H.

R. M. LASLETT, M.B., CH.B., D.P.H.

R. A. MATTHEWS, M.B., B.S., D.P.H.

MARY I. MCARTHUR, M.B., CH.B., D.P.H.

E. PAMELA MOFFITT, L.M.C.C., D.P.H.

WINIFRED J. RISK, M.B., CH.B. (*Half-time*)

MARY R. VENNING, B.M., B.CH., C.P.H. (*Half-time*)

#### *\*Principal School Dental Officer:*

C. H. GRIFFITHS, L.D.S.

#### *Superintendent Health Visitor:*

MISS D. K. NEWINGTON

#### *Chief Administrative Officer:*

E. L. EYRE

#### *Supervisor of Midwives and Home Nurses:*

MISS D. T. N. COLE

#### *Deputy Chief Administrative Officer:*

A. D. H. RIDPATH

#### *County Home Help Organiser:*

MRS. A. TOMLINSON

#### *County Health Inspector:*

J. W. KENDALL

#### *Senior Medical Social Worker:*

MISS E. R. GLOYNE

#### *County Transport and Ambulance Officer:*

E. W. DANIELS

#### *Senior Occupational Therapist:*

MISS F. B. SILK

\*Also eight School Dental Officers employed part-time on the dental care of expectant and nursing mothers and young children

### (b) Part-time Officers of the Authority and others discharging duties for the Authority

#### *County Consultant (diseases of the chest):*

A. STEPHEN HALL, M.A., M.B., F.R.C.P.

#### *Physicians (diseases of the chest):*

Oxford Regional Hospital Board .. W. T. BIRMINGHAM, B.A., M.D., B.CH.

A. STEPHEN HALL, M.A., M.B., F.R.C.P.

F. S. HAWKINS, M.D.

North West Metropolitan  
Regional Hospital Board .. BRIAN C. THOMPSON, M.A., M.D.

#### *Consultant Geriatrician:*

L. WOLLNER, M.B., B.S., M.R.C.P.

#### *Consultant Psychiatrists:*

EDITH M. BOOTH, M.B., CH.B., D.P.M.

MILDRED I. POTT,

M.B., CH.B., D.C.H., D.P.M.

#### *Chief Inspector:*

G. L. DAVIS, M.I.W.M.A.

#### *Public Analyst:*

ERIC VOELCKER, F.R.I.C., A.R.C.S.



## SECTION A.—GENERAL STATISTICS FOR THE COUNTY

The area of the geographical and administrative County is 479,411 acres (approximately 749 square miles) and the numbers of private households and private dwellings at the 1961 census were 149,053 and 152,525 respectively, increases over the 1951 census figures of 31.9 and 39.7 per cent.

The rateable value of the County at 1st April, 1963, was £27,421,237 as against £8,335,603 at 1st April, 1962, an increase of 229 per cent. This increase was mainly due to revaluation which came into operation on 1st April, 1963.

The estimate of the Registrar General for mid-1962 refers to the home population including members of the armed forces stationed in the area, and amounts to 505,130 compared with 491,400 for 1961. The provisional figure for the 1961 census is 486,183.

Census populations, estimated populations, birth and mortality rates for individual County Districts are quoted in Table (d) of Section H.

Live Births.

		1961			1962		
		Males.	Females.	Total.	Males.	Females.	Total.
Legitimate .. ..	..	4,459	4,259	8,718	4,683	4,519	9,202
Illegitimate .. ..	..	211	204	415	257	255	512
Totals .. ..	..	4,670	4,463	9,133	4,940	4,774	9,714
					1960	1961	1962
Live birth rate per 1,000 population .. ..	..				18.6	18.6	19.2
Illegitimate live births per cent of total live births .. ..	..				4.7	4.5	5.3
Number of stillbirths .. ..	..				112	145	144
Stillbirths rate per 1,000 total live and stillbirths .. ..	..				12.7	15.6	14.6
Total live and stillbirths .. ..	..				8,853	9,278	9,858
Number of infant deaths (deaths under one year) .. ..	..				173	165	174
Infant Mortality Rates.							
Total infant deaths per 1,000 total live births .. ..	..				19.8	18.1	17.9
Legitimate infant deaths per 1,000 legitimate live births .. ..	..				19.9	18.2	18.1
Illegitimate infant deaths per 1,000 illegitimate live births .. ..	..				17.1	14.5	13.7
Number of deaths of infants under four weeks .. ..	..				137	128	121
Neo-natal mortality rate (deaths under four weeks per 1,000 live births) .. ..	..				15.7	14.0	12.5
Number of deaths of infants under one week .. ..	..				125	114	106
Early neo-natal mortality rate (deaths under one week per 1,000 live births) .. ..	..				14.3	12.5	10.9
Perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths) .. ..	..				26.8	27.9	25.4
Number of maternal deaths (including abortion) .. ..	..				1	1	1
Maternal mortality rate per 1,000 live and still births .. ..	..				0.11	0.11	0.10
Principal causes of death—							
Heart disease .. ..	..				1,456	1,462	1,583
Cancer .. ..	..				917	886	903
Bronchitis .. ..	..				226	219	262
Pneumonia .. ..	..				291	297	315
Influenza .. ..	..				12	55	25
Tuberculosis—Respiratory .. ..	..				21	16	21
Other forms .. ..	..				3	1	2
Motor vehicle accidents .. ..	..				76	76	96
Accidents in the home .. ..	..				59	35	33
Other accidents .. ..	..				27	54	54
Total deaths from all causes .. ..	..				4,560	4,603	4,865
Death rate per 1,000 population .. ..	..				9.7	9.4	9.6

It will be noted above that this year there was again only one death from maternal causes recorded in the County, representing a rate of 0.00 per thousand total live and stillbirths. The rate for England and Wales was 0.35, a slight increase over the new low record of the previous year.

It is gratifying to report that for the fifteenth year in succession no death from diphtheria occurred in the County.

## SECTION B.—GENERAL PROVISION OF HEALTH SERVICES

### NATIONAL HEALTH SERVICE ACT, 1946

#### SECTION 22.—CARE OF MOTHERS AND YOUNG CHILDREN

##### Child Welfare Centres

During the year under review, attendances at the Child Welfare Centres increased. One new centre was opened at Hughenden Valley and additional sessions at other centres were introduced as the demand arose. In all, 20,588 children paid 122,242 visits to 122 centres.

Observation of the child's developmental progress, and referral elsewhere for treatment if necessary when a deviation from the normal is noted, were two of the most important activities at the child welfare centres. To ensure that children are examined annually, attendance at the time of the child's birthday was encouraged and at one village centre, the voluntary committee provided small presents for children when they came for their birthday examinations. The schedule of immunisation introduced last year includes an injection for children when they are eighteen months old. This provides an ideal opportunity to examine the child at a time when hitherto many mothers have not realised that a visit to the centre is useful.

A new trend, which is becoming clear, occurred in the busy town child welfare centres. Gone are the days when the mothers came to purchase baby foods at a reduced price, to weigh the baby, perhaps see the doctor, and spend the afternoon gossiping with their friends. Now they want the time they wait at the centres to be cut down so that they can be away to do their shopping or meet their other children from school. There is no harm in this trend provided there remains time for all mothers to discuss their problems fully with the medical officer or the health visitor if they wish to do so.

Only at a few centres was it possible for group health education to take place. Often a room was not available, the health visitor was fully occupied giving individual advice and the mothers, who may be worrying about their children running about the premises, were unable to give their full attention. The mother's clubs to a large extent fill this gap nowadays.

During the year, conferences for members of the voluntary committees were held in the four Health Areas. The work of the child welfare centres was discussed and ideas exchanged between members from different centres, which besides proving to be of interest to the members themselves, provided the staff with useful information for future planning. The home help service and road safety for the under fives were other topics included in the programmes as were stimulating talks describing two of the latest items of interest in the public health field, namely smoking and health and the prevention of tooth decay in children by the fluoridation of drinking water.

No comment on the child welfare centres would be complete without including once again my thanks to the ladies of the voluntary committees who do so much to maintain the happy atmosphere of the centres.

The following table gives particulars of the attendances at the child welfare centres operating during the year, corresponding figures for the previous year being shown in parentheses:—

	<i>Permanent</i>		<i>Mobile</i>		<i>Voluntary</i>		<i>Total</i>	
(1) Centres operating at end of year .. .. .	102	(101)	17	(17)*	3	(3)	122	(121)
(2) Times centres opened ..	3,046	(2,897)	198	(209)	59	(60)	3,303	(3,166)
(3) Attendances by Medical Officers .. .. .	2,202	(2,060)	198	(209)	35	(36)	2,435	(2,305)
(4) Examinations by the Medical Officer .. .. .	29,900	(29,573)	2,328	(2,387)	238	(281)	32,466	(32,241)
(5) Children who first attended during the year and at their first attendance were under one year of age .. ..	8,026	(7,326)	304	(281)	113	(84)	8,443	(7,691)
(6) Children who attended during the year and who were born in:								
(a) 1962 .. .. .	7,042	(6,301)	257	(239)	94	(63)	7,393	(6,603)
(b) 1961 .. .. .	6,171	(6,081)	268	(250)	76	(86)	6,515	(6,417)
(c) 1957-60 .. .. .	6,176	(5,949)	445	(490)	59	(58)	6,680	(6,497)
(7) Total number of children who attended during the year	19,389	(18,331)	970	(979)	229	(207)	20,588	(19,517)



- (8) Attendances during the year made by children who at the date of attendance were:
- |   |         |           |       |         |       |         |         |           |
|---|---------|-----------|-------|---------|-------|---------|---------|-----------|
| (a) Under one year ..                       | 82,641  | (77,515)  | 1,732 | (1,678) | 754   | (634)   | 85,127  | (79,827)  |
| (b) One but under two years .. ..           | 20,428  | (19,425)  | 938   | (933)   | 192   | (232)   | 21,558  | (20,590)  |
| (c) Two but under five years .. ..          | 14,316  | (14,518)  | 1,171 | (1,170) | 190   | (159)   | 15,557  | (15,847)  |
| (9) Total attendances during the year .. .. | 117,385 | (111,458) | 3,721 | (3,781) | 1,136 | (1,025) | 122,242 | (116,264) |
- \* Seventeen half-day sessions each month covering 49 villages.

### Distribution of Welfare Foods

The arrangements for the distribution of welfare foods continued during 1962 and it is with pleasure that I again record my appreciation of the generous help given by the many voluntary helpers in the operation of the distribution centres. These centres are organised with the co-operation of the Women's Voluntary Services, the British Red Cross Society and Women's Institutes. The value of the help given is reflected by the fact that it is still only necessary to employ part-time paid help at three centres. In a county as large as Bucks this is a remarkable achievement by voluntary effort.

During the year a few small centres were closed and several additional centres were opened to serve local needs, so that at the end of the year there were 137 distributive centres, of which 88 were held in conjunction with child welfare centres. Welfare foods were also available on the mobile child welfare centre which called at 49 villages once each month.

The following is a summary of issues from the centres during the year 1962 in accordance with quarterly returns required by the Ministry of Health, with the figures for the previous year being shown in brackets:—

National dried milk—full cream .. ..	44,705	tins	(48,677)
National dried milk—half cream .. ..	605	tins	(791)
Cod liver oil .. ..	10,852	bottles	(21,789)
Orange juice .. ..	116,045	bottles	(161,910)
Vitamin tablets .. ..	13,378	packets	(21,482)

### Ante-Natal and Post Natal Care

Most of the ante-natal and post natal work was undertaken at specialist ante-natal clinics administered by the Hospital Management Committees since the majority of confinements were again booked to take place in hospital maternity units or maternity homes. There were, however, thirteen midwives ante-natal clinics operating at the end of the year and in all, 2,107 expectant mothers made a total of 8,422 attendances. Of these mothers, some 248 also received post natal examinations.

As in previous years, the training of expectant mothers in mothercraft, relaxation, and correct breathing technique, in preparation for confinement was undertaken by many domiciliary midwives and health visitors. A total of 1,306 classes were held during 1962 compared with the total of 1,278 during 1961.

Reference to this form of ante-natal training is given in the section relating to Health Education.

### Maternity Accommodation

By arrangement with Hospital Management Committees, applications for maternity beds, made for social and domestic reasons, are submitted to me. Each application is investigated and recommendations are made to the appropriate officers appointed by Hospital Management Committees based on the Health Visitor's report after she has made a home visit; by this means an endeavour is made to make the best use of available beds.

During the year, the number of such investigations undertaken by the health visitors in the four health areas in the County was as follows; figures for 1961 are shown in parentheses:—

South Bucks .. ..	2,264	(1,853)
North Bucks .. ..	Nil	(Nil)
Wycombe Area .. ..	977	(1,010)
Aylesbury Area .. ..	542	(504)

It should be noted, however, that the Matron of the Westbury Maternity Home, Newport Pagnell, still undertakes all maternity bookings in the North Bucks area.

### Premature Births

There was an increase in the number of premature births (a premature birth is defined as one weighing 5½ lbs or less, irrespective of the period of gestation) to mothers resident in the County during 1962.

The following summary gives details of both premature live-births and premature still-births, the corresponding figures for the previous year being shown in parentheses:—



Premature Live-Births:

(a)	In hospital	..	..	..	..	440	(424)
(b)	At home	..	..	..	..	87	(83)
(c)	In private nursing homes	..	..	..	..	9	(7)
						<u>536</u>	<u>(514)</u>

Premature Still-Births:

(a)	In hospital	..	..	..	..	76	(64)
(b)	At home	..	..	..	..	3	(10)
(c)	In private nursing homes	..	..	..	..	—	(2)
						<u>79</u>	<u>(76)</u>

The number of premature live-births expressed as a percentage of the total live births is 5.47 per cent; this compares favourably with the figure of 5.68 per cent for 1961.

Where premature births occur at home, midwives are required to seek immediate advice and any necessary assistance from the County Supervisor of Midwives, and special portable heated cots and an infant oxygen tent are available for use in nursing premature infants at home. When necessary, arrangements are made to transfer premature babies to hospital.

Health visitors continued to pay particular attention to the care of premature babies when the responsibility of the midwife ceased at the end of the lying-in period. They also continued to maintain close liaison with maternity departments of hospitals and with maternity homes in order to obtain early information of the discharge of children to their own homes and of any special care needed.

Detailed information of survival related to birth weights is compiled for all premature live births, including those occurring in hospitals, and the following table also includes details of the weights of premature stillbirths:—

	WEIGHT AT BIRTH				TOTAL
	3lbs. 4ozs. or less	Over 3lbs. 4ozs. up to and including 4lbs. 6ozs.	Over 4lbs. 6ozs. up to and including 4lbs. 15ozs.	Over 4lbs. 15ozs. up to and including 5lbs. 8ozs.	
<b>Premature live births</b>					
Born in hospital—					
Died within 24 hours of birth ..	24	4	5	4	37
Died aged 2-28 days .. ..	12	5	5	4	26
Survived 28 days .. ..	22	60	91	204	377
Total .. ..	58	69	101	212	440
Born at home and nursed entirely at home—					
Died within 24 hours of birth ..	3	1	—	2	6
Died aged 2-28 days .. ..	1	1	—	—	2
Survived 28 days .. ..	—	4	8	44	56
Total .. ..	4	6	8	46	64
Born at home and transferred to hospital before 28th day—					
Died within 24 hours of birth ..	2	1	—	—	3
Died aged 2-28 days .. ..	2	—	1	—	3
Survived 28 days .. ..	1	6	4	6	17
Total .. ..	5	7	5	6	23
Born in Nursing Home and nursed entirely there—					
Died within 24 hours of birth ..	—	—	—	—	—
Died aged 2-28 days .. ..	—	—	—	—	—
Survived 28 days .. ..	—	—	2	7	9
Total .. ..	—	—	2	7	9
Born in Nursing Home and trans- ferred to hospital before 28th day—					
Died within 24 hours of birth ..	—	—	—	—	—
Died aged 2-28 days .. ..	—	—	—	—	—
Survived 28 days .. ..	—	—	—	—	—
Total .. ..	—	—	—	—	—
<b>Premature stillbirths</b>					
Born in hospital .. ..	39	19	9	9	76
Born at home .. ..	2	1	—	—	3
Born in Nursing Home .. ..	—	—	—	—	—

## Nurseries

### (i) Day Nurseries

The Manor Park Day Nursery in Slough which provides accommodation for 35 children is the only day nursery maintained by the County Council. At the end of December 1962 there were 30 children on the register at this nursery; the average daily attendance throughout the year was 21 as compared with the average of 17 throughout 1961.

Arrangements continued during 1962 whereby children resident in this County can be admitted to day nurseries maintained by Middlesex County Council; there were two children from Buckinghamshire attending the Uxbridge Day Nursery at the end of 1962. Financial responsibility for the maintenance of these children is only accepted when the children are in the priority classes for day nursery admission and where it has been impossible to make alternative arrangements.

### (ii) Residential Nurseries and Children's Homes

Medical Officers of the County Health Department undertook the medical supervision of the undermentioned nurseries and children's homes by arrangement with the Children's Committee:—

	<i>Capacity of Homes</i>				
Aylesbury Area:					
23 Walton Road, Aylesbury .. .. .	..	..	..	..	12
1a Churchill Avenue, Aylesbury .. .. .	..	..	..	..	10
65 Priory Crescent, Aylesbury .. .. .	..	..	..	..	9
South Bucks Area:					
Brookside, Slough (formerly Larchmoor) .. .. .	..	..	..	..	24 plus 2 isolation
Crossfield House, Gerrards Cross .. .. .	..	..	..	..	18
Manor Lodge, Slough .. .. .	..	..	..	..	18
Wycombe Area:					
Bledlow—South Wing .. .. .	..	..	..	..	14
Jasmine "A" .. .. .	..	..	..	..	12
Jasmine " B " .. .. .	..	..	..	..	12
Aylesbury House .. .. .	..	..	..	..	15
The Mount, Kimble .. .. .	..	..	..	..	15
292 Micklefield Road, High Wycombe .. .. .	..	..	..	..	9

The arrangements whereby medical officers of the Department examine all children on admission to residential nurseries and at intervals afterwards and carry out vaccination and immunisation where necessary, continued during the year. The medical officers also advised on general hygiene in nurseries, supervised the diet and feeding, arranged the medical examination of staff, including periodic X-ray examination, and furnished medical reports on children about to be boarded out or adopted.

### (iii) Training

The Manor Park Day Nursery, Slough and the Brookside Residential Nursery in Slough are both recognised as training schools for the National Nursery Examination Board Certificate. The medical and nursing staff of the Health Department continued during 1962 to help in teaching the appropriate sections of the syllabus.

Students were not accepted at the day nursery but it continued to be used by the Education Committee for students from nursery schools to enable them to obtain experience with young babies.

## Care of Illegitimate Children

During 1962, a total of 107 unmarried mothers were admitted to suitable mother and baby homes under arrangements made by the Oxford Diocesan Council for Moral Welfare which Council undertakes this work for the County Council on an agency basis. This was an increase of nine cases over the total for 1961. Financial assistance, consisting of the ascertained cost of maintenance at selected mother and baby homes, less each girl's contribution from insurance and various other sources, for a period of six weeks before and eight weeks after confinement, is made available in approved cases.

An annual grant is also paid to the Diocesan Council in consideration of the case work undertaken by the moral welfare workers employed by them. In addition, one health visitor with special training and experience in moral social welfare is now sharing her duties in the North Bucks Health Area between health visiting and moral welfare case work.

Close co-operation is, however, maintained between health visitors and moral welfare workers in order to ensure the adequate supervision of illegitimate children following discharge from mother and baby homes.

### **Dental Treatment of Expectant and Nursing Mothers and Young Children**

Table (h) of Section H of this report gives details of the number of expectant and nursing mothers and pre-school children examined and treated during the year. The table shows that the number of expectant and nursing mothers treated in 1962 was greater than in previous years and that more fillings and extractions were undertaken for this category of patient. The demand for treatment under this scheme is not great; it is found that many patients do not wish to change their arrangements for receiving dental treatment by their general dental practitioner to attend a local health authority dental clinic for the limited time the particular service is available to them.

The number of pre-school children treated during 1962 was much the same as the number treated in 1961; it is to be noted, however, that more fillings and less extractions were undertaken, which emphasises the importance of conservative treatment for the young child. An increased number of young children were made dentally fit during the year.

The Principal School Dental Officer and other dental officers gave talks during the year on the subjects of "Dental Health" and "The Care of Children's Teeth" to mothers' clubs and voluntary helpers at welfare centres. It was considered advisable to keep in constant touch with these groups since they in turn are constantly in touch with mothers and their young children.

In all there was increased interest in dental health and in particular about the many aspects of fluoridation of water supplies.

In September 1962, Miss S. E. Bligh, dental auxiliary joined the staff and carried out her duties in Slough. In addition to clerical work she gave talks and demonstrations to expectant and nursing mothers.



## SECTIONS 23 AND 25—MIDWIFERY AND HOME NURSING SERVICES

### Staff

Recruitment was a major problem throughout most of the year and a debt of gratitude is owed to those nurses who, for long periods, carried additional case loads.

Some improvement did take place towards the end of the year when the general staffing position reached a point similar to that obtaining at the end of 1961; the whole staffing establishment did not, however, keep pace with the exceptional increase in the population of the County.

At the end of the year under review the position was as follows:—

#### Full-time:

Supervisor of Midwives and Home Nurses	..	..	..	1
Deputy Supervisor of Midwives and Home Nurses	..	..	1	
Assistant Supervisor of Midwives and Home Nurses	..	..	1	
Superintendents of Nurses' Homes	..	..	..	2
District Nurse/Midwife/Health Visitors	..	..	..	15
District Midwives	..	..	..	7
District Nurse/Midwives	..	..	..	90
District Nurses (Female)	..	..	..	8
District Nurses (Male)	..	..	..	2

#### Part-time:

District Midwife	..	..	..	..	..	..	1
District Nurse/Midwives	..	..	..	..	..	..	12
District Nurses	..	..	..	..	..	..	16

In all, thirty-one resignations were received, whilst thirty-five appointments were made. Of these resignations, two left for work abroad, ten were due to domestic reasons, eight left for work with other health authorities, two left on marriage, three on retirement, two because of ill-health, one for voluntary reasons, two to take health visitor training, whilst one nurse died. The two members of the midwifery and home nursing staff who took up health visitors' training were sponsored by the Bucks County Council and on completion of that training will return for duty in the County.

An Assistant Superintendent was appointed early in the year for duty in the Slough Area, but she resigned later. Her successor was appointed but was seconded for further training at the Course on Community Health Administration being held at the William Rathbone College, Liverpool.

At the end of 1962 there were eighteen full-time vacancies, although at that time some of the vacancies were being covered by part-time staff.

#### Summary of Work undertaken by Administrative Nursing Staff

Routine visits to District Nurse/Midwives	..	..	..	..	269
Contact visits	..	..	..	..	68
Special visits	..	..	..	..	85
Interviews	..	..	..	..	39
Committees	..	..	..	..	43
Lectures and discussions	..	..	..	..	81
Staff group meetings	..	..	..	..	23
Teaching rounds	..	..	..	..	81
Maternity units	..	..	..	..	3
Nursing homes	..	..	..	..	15
Independent Midwives	..	..	..	..	4
Ante-natal clinics	..	..	..	..	8
Supervisory visits to Pupil Midwives	..	..	..	..	26
Red Cross examinations and tests	..	..	..	..	2

It was possible to pay more routine visits to district nurse/midwives during the year, whilst the supervisory staff were able to make more visits to pupil midwives undertaking their district training in the County.



**Work undertaken by Domiciliary Nursing Staff**

<b>Midwifery</b>						<i>Cases</i>	<i>Visits</i>
Deliveries	..	..	..	..	..	3,233	60,484
Ante-natal	..	..	..	..	..		33,939
Hospital discharges	..	..	..	..	..	1,606	16,997
Post natal	..	..	..	..	..		1,422
Supervisory	..	..	..	..	..		3,769
Miscarriages	..	..	..	..	..	160	1,062
							<hr/> 117,673
<b>General Nursing</b>							
Medical	..	..	..	..	..	7,010	165,232
Surgical	..	..	..	..	..	1,792	30,052
Infectious diseases	..	..	..	..	..	13	161
Tuberculosis	..	..	..	..	..	100	4,797
Maternal complications	..	..	..	..	..	180	1,245
Others	..	..	..	..	..	609	2,003
Casual visits	..	..	..	..	..		11,473
							<hr/> 214,963
						<b>Grand Total</b>	<hr/> 332,636

**Midwifery**

In all, 9,651 mothers were delivered in the County during the year, this being an increase of 3.8% over the previous year. Of this total, 3,230 mothers were delivered at home by domiciliary midwives; in addition, these midwives nursed some 1,606 mothers who, having been confined in hospital, were discharged to their own homes early in the lying-in period. In some cases these "early discharges" were emergency cases admitted to hospital for delivery although booked for home confinement.

There were 42 less admissions to maternity beds in hospitals than in the preceding year, but there were more discharges in the early days from those beds; some 1,200 more visits were made to those mothers discharged from hospital very early in the lying-in period.

The following table shows the actual trend towards earlier discharge which became evident during the year:—

<i>Day of Discharge</i>	<i>1st</i>	<i>2nd</i>	<i>3rd</i>	<i>4th</i>	<i>5th</i>	<i>6th</i>	<i>7th</i>	<i>8th</i>	<i>9th</i>	<i>10th and Over</i>	<i>Total</i>
1961	161	372	208	116	77	107	134	176	150	148	1,649
1962	185	420	220	128	119	124	106	145	82	77	1,606

The number of ante-natal visits made in respect of domiciliary cases was 33,939, a reduction of 96 from the total for 1962. Domiciliary midwives are now linking up more closely with general medical practitioners and attending ante-natal clinics arranged by the family doctor; it follows that in this way less home visits are required to allow for the routine supervision of expectant mothers. The arrangement has much to commend it since it avoids overlapping, is sometimes more convenient for the expectant mother, and it provides a common meeting point for the doctor and midwife where information about their patients can be exchanged.

**Obstetric Flying Squad**

A total of 42 calls for the obstetric flying squad was made during 1962; responses to calls were from the following hospitals: Canadian Red Cross—12; Amersham General Hospital—9; Royal Bucks Hospital—11; Radcliffe Hospital—1; Hillingdon Hospital—1; Old Windsor Hospital—2; High Wycombe Pathological Laboratory—2 (for blood transfusions); Shrubbery Maternity Home (Oxycot)—2; and Barratt Maternity Home—2. The conditions treated by the Flying Squad included: post partum haemorrhage—23; retained placenta—8; ante-partum haemorrhages—3; premature infants—5; twin delivery—1; miscarriage—1; and unsatisfactory condition of infant—1.

## **Analgesia**

Pethidine and Pethilorfan were given in 1,646 cases, this being an increase of 194 cases over the figure for 1961. Some 2,364 cases were given gas and air analgesia as compared with 2,516 during the previous year. The improved trend in the use of trilene continued during 1962; 589 cases receiving this form of analgesia as against 424 in 1961 and 251 in 1960.

There are now eighteen trilene machines available for use by domiciliary midwives in the County.

## **Resuscitation of the Newborn**

Oxygen administered by the Sparklet apparatus carried by the domiciliary midwives was given to new born infants in 88 instances. The Flying Squad for the transfer of premature infants from home to hospital was used seven times and the heated cot was used on two occasions for nursing care at home.

## **General Nursing**

The number of cases referred to district nurses was 300 less than the number referred in 1961 but, on the other hand, 6,000 more visits were made during 1962. Of the total visits made, fully 63% were to patients over the age of sixty five, being nursed in their own homes.

Long term illness and its implications is a subject which has been given increased consideration. Six nursing staff attended a conference in London, the main object of which was to focus thought and attention on those members of the community who bear the burden of long term care for sick or handicapped relatives and friends, a burden which is increasing with the growing emphasis on community care in all its aspects. Prolonged stress and strain render this group particularly vulnerable to mental trauma.

## **Marie Curie Day and Night Service**

The Marie Curie Memorial Foundation continued to make it possible to supply day and night nursing care for cancer patients being nursed at home. In this way, 40 cases were attended during the year; at the end of which there were 21 members of the staff employed on these duties.

The greatest demand for this service came from the Aylesbury and South Bucks Health Areas. Recruitment improved in the North Bucks Health Area, whilst at the same time the service became more widely known.

The Foundation made grants totalling £1,297 to allow this most valuable service to be maintained, whilst donations towards the cost were received from grateful relatives.

## **Nursing Aid Service**

Towards the end of the year, approval was given to the offer, made by the British Red Cross Society and St. John Ambulance Brigade, to make available the voluntary services of their personnel, in the nursing at home, of the chronic sick and physically handicapped patients. Under these arrangements volunteers will work under the supervision of the district nurse and the family doctor, and will be able to give help in washing patients' hair, care of the feet and giving bed baths. Volunteers will also act as sitters-in, as escorts and as demonstrators of aids to the disabled.

## **Care of the Aged and Incontinent**

It was not possible during the year to extend the arrangements for the laundering of bedding used by incontinent patients being nursed in their own homes. The service continued to be available, however, in the Aylesbury and High Wycombe areas where thirty cases were helped. Our thanks are due to the St. John's, Aylesbury, Amersham and High Wycombe Hospitals for their assistance in providing this service, which was greatly appreciated by the relatives concerned.

## **Post Certificate Education**

Midwifery post graduate courses were attended by twenty-six domiciliary midwives; these courses, arranged in order to allow midwives to comply with the requirements of the Central Midwives Board, were held in Hull, Stoke-on-Trent, Oxford and Birmingham. One midwife was sponsored at a three months' refresher course in hospital so that she could be re-instated on the Roll of Practising Midwives. Two midwives attended a course arranged by the Royal College of Midwives on relaxation and parentcraft teaching. One male district nurse attended a refresher course held in Liverpool on the subject of the "Need for Male District Nursing."

The Royal College of Nursing arranged a day conference for district nurses and ward sisters. During the morning some ward sisters visited the homes of patients along with district nurses; other district nurses visited hospitals to meet ward sisters. During the afternoon session of the conference representatives from hospital staffs and public health staff met and were able to widen the understanding of each other's work.

## Lectures and Training

**District Nurse Training:** Ten nurses, including one male nurse, completed the course during 1962, whilst two were in training at the end of the year.

**Student District Nurses:** Twenty-three candidates came from the Training Centre, North London, Bermondsey, South London, Hackney and Fulham Training Homes to gain experience in a rural area. The students, who stayed for three days, accompanied nurses undertaking generalised work and in this way were given the opportunity of gaining an insight into the organisation of generalised duties in a rural community.

**Pupil Midwives:** Fifty pupil midwives undertook their Part II district training in the County during 1962, this being the highest number received in one year since the joint training scheme was first approved in 1949. Of this total, 30 candidates were successful in their examination, three failed the examination, fourteen were still undergoing training at the end of the year, whilst one did not complete the course.

**Student Nurses:** The Deputy Supervisor of Midwives and Home Nurses and the Superintendent of the Slough Nurses' Home gave lectures to students at the Aylesbury, High Wycombe, Amersham and Canadian Red Cross Hospitals on the subject of the home nursing and midwifery services. Observation visits with district nurses were arranged, these being followed by group discussions on the social aspects of disease. The Area Superintendent Health Visitor and the Hospital Sister Tutor were also present at the group discussions.

**Student Nursery Nurses:** Lectures on the care of the newborn and premature infant were given to nursery nurse students at the Slough College of Further Education by the Superintendent of the Slough Nurses' Home.

## Work in Connection with the Central Midwives Board

### Notifications:

(a) Intention to Practise, from which the roll of practising midwives is prepared:

#### *Institutional:*

Working in hospital .. .. .	115
Working in private nursing home .. .. .	8

#### *Domiciliary:*

Employed by Local Health Authority .. .. .	132
Engaged in private practice .. .. .	31

(b) **Medical Aid Forms:**

	<i>Domiciliary</i>	<i>Institutional</i>
Mother .. .. .	681	62
Infant .. .. .	80	7
Stillbirths .. .. .	14	42
Death of infant .. .. .	9	9

Independent midwives attended three home confinements and two mothers delivered in hospital who returned home for nursing care.

An investigation was carried out in connection with section D of the Board's rules in respect of one hospital midwife for misapprehending drugs. The case was heard by a Magistrates' Court and by the Central Midwives Board.

## Maternity Services Co-ordinating Committee

Two meetings were held in Aylesbury and Windsor. As a result of discussion, provisions for the transport of premature babies from home to hospital were revised and oxycots made available.



## SECTION 24.—HEALTH VISITING

### Centenary of Health Visiting

In 1862 the first voluntary scheme for the instruction of mothers, by home visitors, in the upbringing of their young children started in the northern industrial cities of England. Some thirty years later Miss Florence Nightingale, who spent much of her time at Steeple Claydon in this County, realised that mothers living in the villages were in urgent need of health instruction. Mainly through her efforts the first course of training for health visitors was carried out in Buckinghamshire and three of these trained health visitors were employed in 1892 in the villages around Buckingham.

To commemorate the centenary, health visitors employed in the County with the support of the Health Education Organisers, carried out the necessary research and planning and then produced an exhibition which portrayed:—

- (i) the limited role of the pioneer health visitors who were concerned with general hygiene and the purely physical care of village families, compared with the varied duties of the present day trained health visitor, whose aim is to promote the good mental and physical health of any member of the community needing her skilled help.
- (ii) the work undertaken by health visitors during the inter-war years when their concern was the physical well-being of young children, when much of her time was spent at minor ailment and treatment clinics, and when the importance of prevention was beginning to be accepted and so played a more important role in her work.

The exhibition was shown privately during July at Slough, High Wycombe and Bletchley. On these occasions the health visitors entertained representatives of the Ministry of Health, general medical practitioners and many friends and colleagues. During the autumn the exhibition was on view to the general public for several days at High Wycombe Town Hall, Slough Public Library, Wilton Hall, Bletchley and Aylesbury High School.

When, with the kind permission of Miss Camp, Headmistress, the exhibition was staged at the Aylesbury High School it was visited by about 25 organised groups, which included student nurses from Stoke Mandeville Hospital, St. John's Hospital, Aylesbury, Princess Mary's R.A.F. Hospital, Halton, students from the Aylesbury College of Further Education, pre-nursing students and senior girls from schools in the Aylesbury Area. This particular staging of the exhibition was seen by about 500 people.

When conducting groups around the exhibition the opportunity was taken by the health visitors to help the viewers to understand the changes which have taken place in the work over the years and the reasons for those changes.

General interest was shown both in the subject matter of the exhibition and in the method of presentation.

### Staff

The staffing position at the end of the year was as follows:—

Superintendent Health Visitor	..	..	..	..	..	..	1
Deputy Superintendent Health Visitor	..	..	..	..	..	..	1
Area Superintendent Health Visitors	..	..	..	..	..	..	3
Full-time Health Visitors	..	..	..	..	..	..	48
Part-time Health Visitors	..	..	..	..	..	..	4
Moral Welfare Worker/Health Visitor	..	..	..	..	..	..	1
District Nurse/Health Visitors (equivalent to 5 full-time)	..	..	..	..	..	..	15
Full-time Tuberculosis Health Visitor	..	..	..	..	..	..	1
Chest Clinic Sister	..	..	..	..	..	..	1
School Health Assistants (Part-time)	..	..	..	..	..	..	17
Student Health Visitors in training	..	..	..	..	..	..	5

Of the 15 District Nurse/Health Visitors, 14 hold their Health Visitor's Certificate.

The Chest Clinic Sister is engaged in technical nursing duties only.

All health visitors undertake school nurse's duties in the School Health Service.

The year 1962 brought recruitment difficulties; seven full-time health visitors left whilst it was only possible to appoint four full-time and three part-time health visitors. Three of the full-time appointments were taken up by student health visitors, sponsored by the County Council who qualified in July and commenced duty in August.



## Statistics

The following summary gives an indication of the work undertaken by the health visiting staff during the year; the corresponding figures for the previous year being shown in parentheses:—

	<i>First Visits</i>	<i>Total Visits</i>
Expectant Mothers .. .. .	3,758 (3,788)	5,001 (5,144)
Children under one year of age .. ..	10,112 (9,832)	41,785 (40,012)
Children aged one but under two years ..		13,808 (15,114)
Children aged two but under five years ..		23,349 (25,551)
Tuberculosis Households .. .. .		2,170 (2,046)
Care of the Aged and Chronic Sick .. ..		4,199 (3,122)
Other Special Enquiries (including hospital follow-up) .. .. .		5,766 (5,352)
School children—Visits to Homes .. ..		2,617 (2,755)
School children—Visits to School .. ..		1,610 (1,673)
Total number of children under five years of age visited during year for the first time		29,069 (28,867)
Total number of families or households visited		25,628 (24,310)
Number of hours spent on consultations with other workers .. .. .		3,646 (2,993)*
Number of hours spent on interviews .. ..		728 (952)*
Number of hours devoted to clerical work ..		19,403 (18,006)●
Ineffectual visits—all categories .. ..		14,004 (11,782)

\*This figure relates to the actual number of consultations or interviews.

●This figure relates to sessions.

## Health Assistants

Seventeen part-time Health Assistants were being employed at the end of the year and the following is a summary of work undertaken by them with the corresponding figures for the previous year shown in parentheses:—

School Health Service						
School Medical Inspections .. .. .						1,143 (992)
Health Surveys .. .. .						576 (489)
Weighing and Measuring .. .. .						135 (175)
Vision Testing .. .. .						444 (346)
Ophthalmic Clinics .. .. .						40 (121)
Minor Ailments .. .. .						31 (34)
Audiometry Clinics .. .. .						7 (—)
Vaccination and Immunisation						
Diphtheria .. .. .						76 (27)
Poliomyelitis .. .. .						186 (357)
B.C.G. .. .. .						135 (107)
Smallpox .. .. .						2 (—)
Tetanus .. .. .						— (1)
Child Welfare Centres .. .. .						583 (509)
Chest Clinics .. .. .						103 (106)
Clerical .. .. .						697 (460)

## Home Visiting

There was an increase in the number of home visits paid to mothers with very young children which corresponded with the considerable rise in the population of the County. This increase in visits necessitated fewer visits being made to mothers with children in the age group 1-5 years.

Work in relation to the follow-up of hospital and special enquiries was maintained during the year but visits to old people in their own homes increased. Many of the recorded ineffectual visits were made to homes where the mother was out at work; further visits had, therefore, to be made in the late afternoon or evening when the family was more likely to be at home.

There was continued development in the fields of group teaching and health education.

## Health Visitor/General Medical Practitioner Liaison Scheme

This scheme, which commenced towards the end of 1961, was continued and expanded during 1962. Early in the year a general medical practitioner was appointed to a rapidly developing housing estate in Aylesbury and the only health visitor not already attached to a practice was taken in to the scheme and attached to that practice.

It then became necessary to adjust the health visitor's case load in order to achieve a reasonable level. It had been found that two health visitors attached to the larger group practices were overloaded, whilst others were able to take on more work. In bringing the scheme into operation it had been anticipated that some adjustments would be necessary but it was only through practical experience of working the scheme with different practitioners that a fair assessment of the patients and of the work entailed could be obtained.

It has been found that in bringing this scheme into operation there are to be borne in mind the choice of an area offering a reasonable chance of success, allowing adequate time for preparation, and general consolidation of the arrangements in order to ensure the participation of all general practitioners and all the health visitors in the area chosen.

The period of preparation has been found to be most important and one which cannot be rushed. In the early stages the Superintendent Health Visitor visits the general practitioners in the chosen area with the aim in mind of discussing the project generally, the scope of the health visitors work and to stimulate interest in the scheme. The plan is then discussed, fully, with the health visitors concerned. Time is then allowed for the idea to be fully appreciated before I meet the general practitioners and health visitors together at an informal meeting. An informal meeting held in the late evening seems to achieve best results. It is interesting to record that a general practitioner practising in Wolverton offered hospitality for such a meeting in his own home.

With one exception only, all general medical practitioners in the areas now covered, i.e. Aylesbury, Wolverton, New Bradwell and Newport Pagnell, agreed to try out the scheme. It was interesting to find that those doctors having initial reservations about the value of the liaison scheme were often the first to recognise the advantages of working with one health visitor.

The final stage is purely administrative; the Superintendent Health Visitor and general practitioners arrange weekly meetings with the health visitor. Prior to this, doctors have been asked for any preference they may have for a particular health visitor; health visitors have been asked if they have any preference for a particular group practice. Any preferences are borne in mind when final arrangements are made.

Experience has shown that knowledge and understanding at the early stages does much to dispel any possible misgivings and the way is cleared for an acceptance of the extended team pattern. It has also shown that the general volume of work increases as family doctors and health visitors work together and that more health visitors are required than on the usual area basis.

Advantages of this liaison scheme include the satisfaction the health visitor gets from her ability to give help and support to a family at the time of medical crisis when it is most needed and when she has a full medical picture of the situation and the doctor's backing. On the other hand, the family doctor relies on the health visitor to supply him with background information, to deal with social implications and when other help is needed to contact the agency concerned.

There are, of course, disadvantages; one is that the familiar conception of one health visitor for a particular district can no longer be maintained. This gives rise to particular difficulties on new housing estates and other areas where the population changes quickly.

The advantages of the scheme far outweigh the disadvantages since it has been found that the patient benefits from the liaison scheme operating in the County; a better service is offered with the doctor and health visitor working together and so gaining an understanding of each others work.

## **Hospital Follow-up**

Regular weekly visits are paid to the Maternity Units throughout the County by the health visitors. Details of discharges expected during the coming week are given, together with any special reports of confinement and of baby's progress. Sisters from Royal Buckinghamshire Hospital, Westbury, Upton and the Shrubbery take part in the ante-natal group teaching classes. The development of maternity liaison has shown a marked improvement this year.

At both Amersham and Stoke Mandeville Hospitals, a health visitor attends the paediatric ward round each week. This is worked on a rota basis of a two-monthly period for each health visitor. Apart from obtaining particulars of the children to be discharged, health visitors get progress reports of out-patients. Home environmental and follow-up reports are asked for by the paediatrician and submitted by the health visitor concerned.

Reports on premature babies are sent to the paediatrician when the baby is one month old, with a further follow-up report five months later.

A useful discussion takes place each week in the ward at Stoke Mandeville Hospital when the geriatrician, ward sister, almoner, physiotherapist, occupational therapist and health visitor attend and progress and future plans for the patients are discussed. Home visits by the health visitors are requested, both prior to and following discharge of patients. Health Visitors are also kept informed of the progress of patients while still in hospital.

At this meeting, too, patients needing holiday admission or those transferred to other hospitals or homes are discussed.

This form of liaison works very well and results in a good patient follow-up.



## SECTION 26.—VACCINATION AND IMMUNISATION

### Vaccination against Smallpox

The following details concerning vaccinations and re-vaccinations undertaken during 1962 (corresponding figures for the previous year being shown in parentheses) give an indication of considerable increase in the number of persons vaccinated or re-vaccinated due, without doubt, to the outbreak of smallpox in the country.

	<i>Age</i>					
	<i>Under 1</i>	<i>1</i>	<i>2-4</i>	<i>5-14</i>	<i>15 or over</i>	<i>Total</i>
Number vaccinated ..	6,571 (5,362)	1,050 (463)	2,354 (275)	9,113 (409)	12,232 (427)	31,320 (6,936)
Number re-vaccinated ..	— (—)	5 (1)	914 (56)	7,574 (246)	22,300 (1,059)	30,793 (1,362)

It will be seen from these figures that nearly five times as many vaccinations against smallpox were undertaken during 1962 as were undertaken during 1961 and that the total number of re-vaccinations completed during 1962 was nearly 30 times the number completed during the previous year.

Vaccination against smallpox continued to be undertaken mainly by general medical practitioners at their own surgeries or at special sessions. The appropriate payments were made for completed record cards; general medical practitioners were, however, advised during the year that record cards in respect of the vaccination against smallpox of persons over the age of fifteen would no longer be required.

The arrangements whereby vaccination against smallpox is undertaken at the larger child welfare centres continued during the year and were appreciated by the mothers concerned.

The schedules of immunisation adopted in the centres were amended towards the end of the year to incorporate the advice given by the Standing Medical Advisory Committee in that the offer of routine vaccination against smallpox should preferably be made during the second year of life instead of at four to five months as previously recommended.

### Vaccination against Poliomyelitis

There was no change during the year in the priority categories for vaccination against poliomyelitis.

#### Numbers Vaccinated

##### (a) with Salk vaccine

###### *Course of Two Injections*

Children born in 1962 .. .. .	288
Children born in 1961 .. .. .	2,477
Children and Young Persons born in 1943-1960 .. .. .	1,700
Young Persons born in years 1933-1942 .. .. .	1,047
Others .. .. .	1,180
Number of persons in all age groups given a third injection .. .. .	12,792
Number of children in the age group 5-12 years given a reinforcing further injection .. .. .	3,469

##### (b) with Oral (Sabin) vaccine

###### *Complete Course of Three Doses*

Children born in 1962 .. .. .	1,233
Children born in 1961 .. .. .	2,220
Children and Young Persons born in 1943-1960 .. .. .	1,473
Young Persons born in years 1933-1942 .. .. .	855
Others .. .. .	1,076
Number of persons given one dose of oral vaccine to complete a primary vaccination started with Salk vaccine .. .. .	7,164
Number of children in the age group 5-12 years given a reinforcing dose with oral vaccine after three injections with Salk vaccine .. .. .	6,189

Following receipt of the Ministry of Health Circular No. 3/62, arrangements were made for Sabin oral vaccine to be available for use in primary vaccinations and in reinforcing vaccinations commenced with two or more injections of Salk vaccine.

The first batch of oral vaccine was received on 15th March, 1962, and thereafter this type of vaccine was used widely as will be seen from the figures given above.

### Immunisation against Diphtheria

The use of triple antigens—containing pertussis, diphtheria and tetanus prophylactic—continued during 1962.

Information relating to immunisations against diphtheria is given in the following table:—

<i>Children born in Years</i>	<i>Half Year ended 30th June</i>	<i>Half Year ended 31st December</i>	<i>Total</i>
1962	98	990	1,088
1961	1,696	1,267	2,963
1960	226	143	369
1959	52	20	72
1958	44	27	71
1953-1957	79	152	231
1948-1952	25	16	41
Reinforcing injections	2,603	5,830	8,433

It is interesting to record that of the 4,835 primary immunisations carried out triple antigen was used in 3,939 cases, diphtheria/pertussis antigen in 50 cases, diphtheria/tetanus antigen in 486 cases and single antigen in the remainder.

### Immunisation against Whooping Cough

Some 4,172 children were immunised against whooping cough during 1962 as compared with 7,429 immunised in 1961. The abnormal demand for vaccination against smallpox, almost without doubt, affected the demand for protection against whooping cough.

Of the 4,172 children immunised against whooping cough, 3,939 were treated with triple antigen, 50 with diphtheria/pertussis antigen, and 183 with single antigen only.

The total number of children born in 1961 or 1962 and immunised against whooping cough during 1962, expressed as a percentage of live births during the twelve months ended 30th June, 1962, was 40 per cent.

### Immunisation against Tetanus

There was a slight decrease in the number of children immunised against tetanus during 1962; the total was 6,996 as compared with 7,053 immunised during 1961. In carrying out these immunisations triple antigen was used in 3,939 cases, double antigen in 486 cases, whilst single antigen was used in the remaining 2,571.



## SECTION 27.—AMBULANCE SERVICE

### Patients

The number of patients dealt with during the year was 189,042 as compared with 184,082 in 1961 and 177,253 in 1960.

The number of emergency cases totalled 21,648 which was approximately 59 per day, as compared with 20,174 and approximately 55 per day in 1961.

### Mileage

The mileage travelled was 1,614,061. Previous figures were 1,587,843 in 1961 and 1,535,853 in 1960.

### Rail Travel

During the year, 769 patients travelled by rail as compared with 759 in 1961 and 806 in 1960.

These journeys afford a considerable saving both in expense and manpower, and approximately 150,000 vehicle miles were saved by taking advantage of the facilities provided on most main line services for stretcher and sitting cases.

### Air Travel

During the year three patients travelled by air, and these journeys also afforded considerable saving in expense and manpower. Approximately 2,900 vehicle miles were saved.

### Staff

The authorised establishment of operational personnel was 155 but at the end of the year there were three vacancies. Of the 152 operational personnel employed, 150 had qualified in first aid; the other two were undergoing training at the end of the year.

Ambulance drivers were entered in the annual safe driving competition organised by the Royal Society for the Prevention of Accidents and of the 125 drivers who were eligible for the 1962 Competition, 91 gained awards for an accident-free year of driving.

### Vehicles

The number of vehicles in use at the end of the year was 61, comprising 37 ambulances and 24 dual-purpose vehicles.

The average mileage per vehicle for the year was approximately 26,460.

### Civil Defence

Four training courses were held during the year in various parts of the County at which 62 volunteers of the Ambulance and First Aid Section attended.

During the year, seven Civil Defence First Aid courses were held for volunteers of the Ambulance and First Aid Section and nine for volunteers of other sections of the Civil Defence Corps.

Two senior ambulance service personnel qualified as Civil Defence Instructors at Falfield, one re-qualified, one Instructor attended a Combined Section Officers' course and two Instructors attended Ambulance and First Aid Section Officers' courses.

A national re-organisation of Civil Defence took place during the latter part of 1962, when all active volunteers were grouped into various classes. (The latest figures, after this re-organisation, amounted to 98 for all classes).

### Private Bookings

Under the provisions of the National Health Service (Amendment) Act, 1957, private bookings were accepted for three sporting events, four films and three patients attending Court proceedings.

### Voluntary Aid Societies

Attendants from the St. John Ambulance Brigade and the British Red Cross Society continued to give their valuable services throughout the year. In addition to duties at ambulance stations they also assisted as escorts for patients travelling by rail. These services were very much appreciated.

## Statistics

Statistics relating to the work of the Ambulance Service for the year under review are shown in Table (j) of Section H and details of patients carried and mileage travelled each year since the inception of the National Health Service Act in July, 1948, are as follows:—

<i>Year</i>	<i>Total Patients</i>	<i>Patients by rail</i>	<i>Vehicle Mileage</i>	<i>Rail Mileage</i>	<i>Total Mileage</i>
1948	18,777	—	387,246	—	387,246
1949	64,337	—	1,066,928	—	1,066,928
1950	69,866	—	1,220,351	—	1,220,351
1951	88,597	—	1,321,406	—	1,321,406
1952	103,625	—	1,378,967	—	1,378,967
1953	117,224	189	1,266,772	24,422	1,291,194
1954	138,192	515	1,202,249	51,406	1,253,655
1955	149,735	592	1,233,586	48,729	1,282,315
1956	152,089	605	1,271,516	62,107	1,333,623
1957	158,336	634	1,335,503	74,506	1,410,009
1958	159,957	688	1,407,469	73,824	1,481,293
1959	170,520	825	1,491,811	85,817	1,577,628
1960	177,253	806	1,535,853	81,715	1,617,568
1961	184,082	759	1,587,843	75,024	1,662,867
1962	189,042	769	1,614,061	74,729	1,688,790

## SECTION 28.—PREVENTION OF ILLNESS — CARE AND AFTER CARE

### Report of the County Chest Consultant

Dr. Stephen Hall, the County Chest Consultant, kindly submitted the following report:—

#### Population and Medical Staff

In 1962 the population of the County was estimated at 505,130 persons, of whom 338,020 lived in the area served by the Oxford Regional Hospital Board and 167,110 in that served by the North West Metropolitan Regional Hospital Board. The medical staff of the former area comprised one part-time consultant, one full-time consultant, one senior hospital medical officer and one registrar, and the latter comprised one part-time consultant, one full-time consultant and a registrar.

#### Clinics

The Clinics are situated at Slough (Upton Hospital), Amersham (General Hospital), Aylesbury (Tindal Hospital), High Wycombe (War Memorial Hospital), Buckingham (Cottage Hospital), Bletchley (Out-Patients Clinic), and Wolverton (Out-Patients Clinic). All these clinics are well equipped.

#### Tuberculosis Register

At the end of 1962 there were 2,655 persons on the register as compared with 2,880 the previous year. The number of infectious cases was very small.

Deaths from tuberculosis numbered 23 (17 in 1961 and 24 in 1960); at this low level we must expect minor variations in rate. The great majority of the deaths were in elderly persons, only one being under 45.

Newly discovered cases numbered 160 (172 in 1961, and 195 in 1960). This decline is satisfactory, especially when one bears in mind the efforts the service makes to uncover new cases. The decline would be even more satisfactory if it were not for the number of cases amongst immigrants, particularly Italians and Pakistanis. Out of 160 new cases no less than 29 or 18% were immigrants. This proportion is not as high as in some districts but is nevertheless high enough. These people often present peculiar difficulties because of their rudimentary knowledge of English and also because of their habit of frequently changing their address.

#### Mass X-ray and Mobile X-ray

One way of uncovering new cases of tuberculosis is to provide easy access to chest radiography and in Buckinghamshire we have made special efforts to meet this. In addition to X-ray service at each clinic we provide visits of the mobile units to 13 small towns and villages on a fixed regular rota each week. This is rapidly proving a popular service. The mass units also pay visits for more specialised purposes; between them they radiographed 18,872 persons and brought to light 10 new cases of tuberculosis and many non-tuberculous lesions in the High Wycombe, Aylesbury and North Bucks areas; in addition, 4,130 persons were radiographed in the South Bucks area and 4 cases of active tuberculosis were found.

#### B.C.G. Vaccination

Vaccination was given to schoolchildren aged 13 who were tuberculin negative. There was 4,874 of them. Only 8.6% of children at this age are now tuberculin positive and this percentage continues to fall. With the advent of tubercle free milk this figure should fall even further. B.C.G. was also given to 740 persons at the chest clinics. Total B.C.G. vaccinations for the year numbered 6,135.

#### General

As tuberculosis declines other chest diseases such as bronchitis and lung cancer become more prominent and in fact show an increasing death roll. Both of these diseases are very intractable to treatment but the incidence of both is influenced by environmental factors such as air pollution and cigarette smoking. The air is clean in Bucks but every effort should be made to dissuade people from smoking cigarettes; perhaps young people should be the main target for our propaganda; not to start is best, but to stop smoking is good. Towards the end of the year arrangements had been made for holding a no smoking clinic for smokers who wished to give it up.

The usual annual follow-up of tuberculosis cases diagnosed six years before in the Oxford Regional Hospital Board area has been continued and details of the enquiry for this and earlier years are given below:—

Year notified	1950	1951	1952	1953	1954	1955	1956
Alive and well after six years	179 (71%)	152 (72%)	154 (78%)	166 (87%)	125 (86%)	79 (80%)	143 (85%)
Not very well .. ..	15	8	15	3	4	1	1
Deaths from all causes ..	40	35	12	10	7	14	13
Lost sight of, gone abroad, etc.	19	14	15	10	9	4	11
Total cases .. ..	253	209	196	189	145	98	168
Recovered .. ..	51 (20%)	40 (19%)	27 (14%)	28 (15%)	18 (12%)	19 (19%)	32 (19%)
Cases still on our register ..	118 (47%)	89 (43%)	118 (60%)	121 (64%)	94 (64%)	56 (57%)	89 (53%)
Deaths considered due to tuberculosis .. ..	23	17	8	2	2	2	—
Tuberculosis recorded as a complication .. ..	2	7	2	4	3	7	7
Death not considered influenced by tuberculosis ..	15	11	2	4	2	5	6
Cases transferred to other areas .. ..	25	31	24	20	13	10	28

## TUBERCULOSIS

### Notification and Mortality

Notifications of, and deaths from, tuberculosis during the twelve-year period 1951-1962, together with death rates per hundred thousand of the population, are given below:—

Year.	Primary Notifications.		Mortality.			
	Respiratory only.	All forms (including respiratory).	Respiratory only.		All forms (including respiratory).	
			Number.	Rate.	Number.	Rate.
1951	309	365	56	14.3	72	18.4
1952	292	345	50	12.7	58	14.7
1953	256	310	35	8.8	37	9.3
1954	235	277	27	6.7	35	8.7
1955	234	277	18	4.4	23	5.6
1956	236	281	31	7.4	33	7.9
1957	172	208	21	4.9	24	5.6
1958	173	211	30	6.8	35	7.9
1959	161	187	27	5.9	33	7.2
1960	155	195	21	4.5	24	5.1
1961	144	172	16	3.3	17	3.5
1962	122	160	21	4.2	23	4.6



The following are the particulars of notifications during the year under review, by sex and age groups:—

Age groups.	Respiratory.		Non-respiratory.		Total.
	Males.	Females.	Males.	Females.	
0—	1	2	—	—	3
1—	1	1	—	—	2
2—4	—	—	—	—	—
5—9	—	—	1	2	3
10—14	1	—	—	—	1
15—19	1	4	—	—	5
20—24	7	7	2	4	20
25—29	10	5	4	2	21
30—34	11	5	4	3	23
35—39	1	4	2	—	7
40—44	9	1	1	2	13
45—49	7	—	2	—	9
50—54	9	4	2	2	17
55—59	10	2	2	1	15
60—64	6	2	—	—	8
65—69	5	1	—	1	7
70—74	2	1	—	1	4
75+	—	2	—	—	2
Totals	81	41	20	18	160

#### RETURN RELATING TO THE WORK OF THE CHEST CLINICS during the year 1962

	RESPIRATORY.				NON-RESPIRATORY.			
	Males.	Females.	Children.	Total.	Males.	Females.	Children'	Total.
Notified cases on Clinic Register at beginning of year .. ..	1,404	1,077	154	2,635	96	120	29	245
Children transferred to adults during the year .. .. .	4	6	—	10	1	1	—	2
No. of notified cases added to Register during the year—								
Class A (not bacteriologically confirmed):								
Group I .. ..	14	15	6	35	20	13	3	36
" II .. ..	14	3	—	17				
" III .. ..	2	—	—	2				
Class B (bacteriologically confirmed):								
Group I .. ..	14	9	1	24	3	4	—	7
" II .. ..	21	9	1	31				
" III .. ..	9	1	—	10				
Transfers in during the year ..	61	58	6	125	3	4	—	7
TOTALS ..	1,543	1,178	168	2,889	120	138	32	290
No. of notified cases removed from Register during the year—								
(a) Recovered .. ..	151	120	13	284	10	18	5	33
(b) Died (all causes) .. ..	37	12	1	50	—	1	—	1
(c) Transfers out .. ..	52	42	7	101	3	1	1	5
(d) Others .. ..	27	7	—	34	1	3	—	9
Children transferred to adults during year .. .. .	—	—	10	10	—	—	2	2
TOTALS ..	267	181	31	479	14	23	8	95
Total remaining on Clinic Register at end of year .. .. .	1,276	997	137	2,410	106	115	24	245

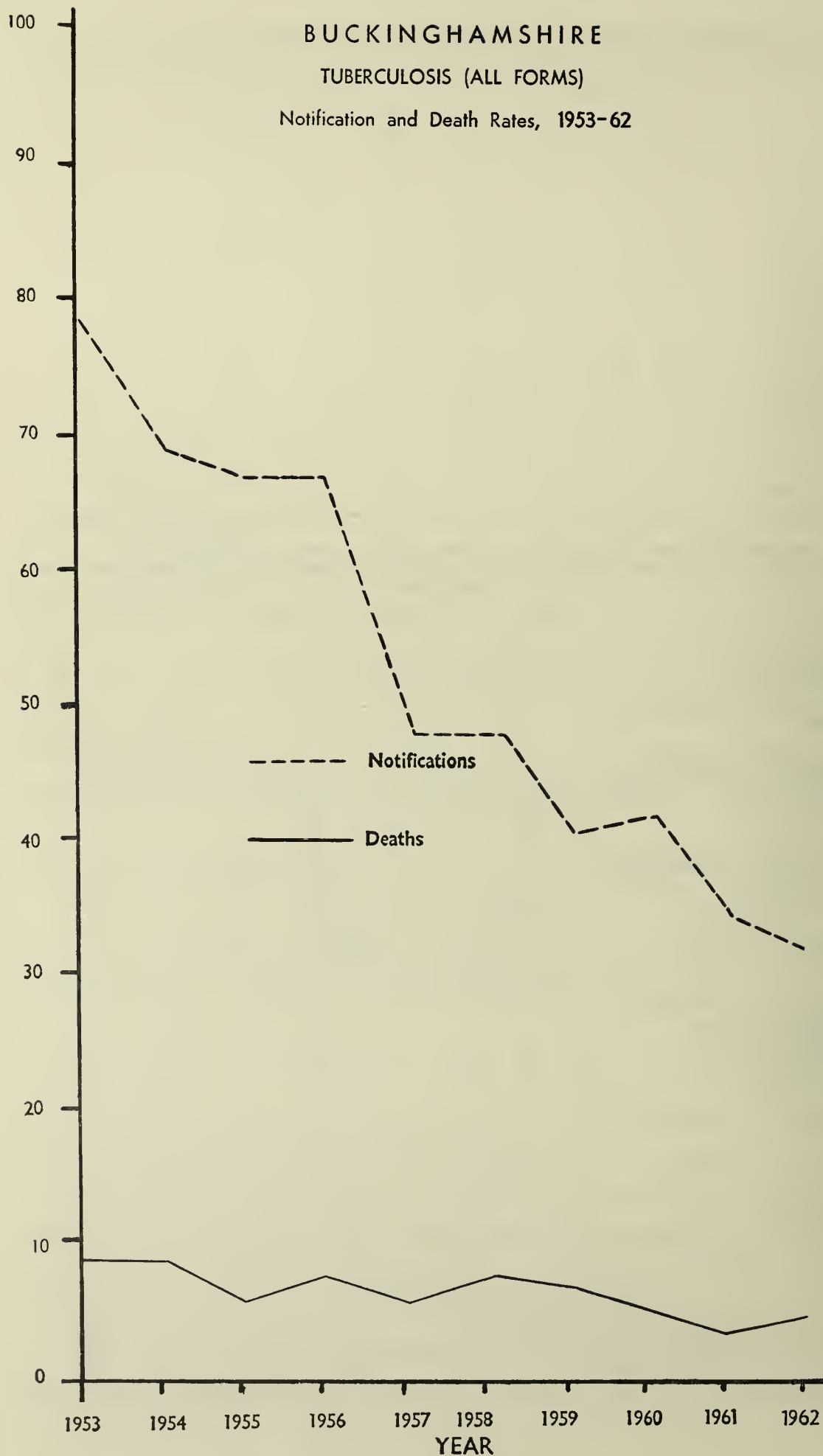
RESPIRATORY AND NON-RESPIRATORY.	Total.
Total number of persons examined for the first time .. .. .	11,848
Number of persons examined for the first time as contacts .. .. .	1,504
Number of persons examined whose broncho-pulmonary secretions were positive and who were not at the time in an Institution .. .. .	45

# BUCKINGHAMSHIRE

## TUBERCULOSIS (ALL FORMS)

Notification and Death Rates, 1953-62

RATES PER 100,000 POPULATION



## HEALTH EDUCATION

Throughout the year the health education service was steadily maintained through the established channels, and extended where possible when a need was shown to exist. A wide range of visual aids were available to all members of the County Health Department staff who are called upon to take part in health education.

### Staff

In May, the County Health Education Organiser resigned, and the duties were taken over by the County Health Inspector, Mr. J. W. Kendall.

Miss B. R. Keene, Area Health Education Organiser, was invited to be on the panel at the Central Council for Health Education seminar on "Parents as Educators" held in January.

### Group Teaching

The following group teaching was carried out during 1962 with the figures for 1961 being shown in parenthesis:—

<i>Talks given by:—</i>				<i>Talks given to:—</i>			
Health Education Staff	..	461	(732)	Expectant Mothers (including evening sessions attended by husbands)	.. ..	1,337	(1,307)
Medical Officers	.. ..	119	(170)	Mothers Clubs and Groups	..	416	(489)
Administrative Health Visiting Staff	.. ..	14	(7)	Parents attending Child Welfare Centres	.. ..	16	(23)
Administrative District Nursing Staff	.. ..	24	(20)	School children	.. ..	296	(227)
Health Visitors and District Nurse/Midwives	.. ..	1,482	(1,193)	Parents Groups	.. ..	25	(14)
Dental Officers	.. ..	30	(23)	Old People's Clubs	.. ..	27	(—)
Other members of County Council Staff	.. ..	114	(150)	Youth Organisations	.. ..	84	(—)
Outside Organisations	..	137	(35)	Outside Organisations	..	261	(551)
Others	.. ..	64	(281)				
Professional Lecturers	..	17	(—)				
		<u>2,462</u>	<u>(2,611)</u>			<u>2,462</u>	<u>(2,611)</u>

### Relaxation and Parentcraft Groups

These groups had again a very active year, with an extension of the service in the Aylesbury area, where regular evening film-shows for prospective parents were held. The film "My First Baby" was shown in all parts of the County to expectant mothers, who attended the relaxation classes, and to their husbands. Details regarding these classes are given in the following table:—

<i>Area</i>	<i>Classes for Expectant Mothers</i>	<i>Total Mothers attended</i>	<i>For Husbands attending with Wives</i>		
			<i>Sessions</i>	<i>Attendance of men</i>	<i>Attendance of women</i>
North Bucks	212	193	3	32	34
Aylesbury	230	343	5	78	85
High Wycombe	433	798	12	310	327
South Bucks	431	678	11	368	391
	<u>1,306</u>	<u>2,012</u>	<u>31</u>	<u>788</u>	<u>837</u>

The tuition at these parentcraft classes was carried out by the area health education organisers, the health visitors and the district nurse/midwives. Regional Hospital Board midwives also took part in three of the larger classes.

## **Mothers' Clubs**

There were at the end of the year, thirty one Clubs in the County, with an increasing membership and enthusiasm for discussions, talks and demonstrations on many aspects of health.

The Annual Rally took place on the evening of May 26th in the Community Centre at Slough, when Mr. E. C. Willatts, O.B.E., Principal Planner in the Ministry of Housing and Local Government, was the guest speaker. Items of light entertainment completed the programme, after the large audience of over 500 club members had seen an exhibition of "Mothers Spare Time Activities," staged by the local clubs.

During the year, all clubs had their constitutions formalised, which appeared to give much satisfaction to the Club committees.

At the Annual General Meeting, held in Aylesbury on October 1st, the clubs agreed to study, amongst their other activities, two set subjects, namely "Smoking and Health" and "Fluoridation of Public Water Supplies."

## **Exhibitions**

Much of the value of exhibitions, whether large or small, lies in the opportunity given to the personnel staffing the exhibition, to carry out group and individual teaching of the people who visit and who show interest.

## **Dental Health**

The British Dental Association invited Buckinghamshire to be one of five County Councils demonstrating their work on dental health education at the British Dental Association's Annual Conference which was held in Nottingham.

An exhibition was prepared by the Health Education Section showing the County's particular approach to the problem, and this was displayed for five days at the Conference which was attended by dentists from the whole of this country and also from many foreign countries.

## **Other Subjects**

Smaller exhibitions were devised and shown, on "Smoking and Health" at the Buckinghamshire Youth Clubs' Rally at Wolverton, and on "Home Safety" at the High Wycombe Show and the Slough Industrial Safety Exhibition.

A greatly increased use of this method of health education was made during the year, particularly in Child Welfare Centres, where 43 small exhibitions on a variety of subjects were displayed.

In exhibition work, whether large or small, the devising and execution of displays is carried out, almost without exception, within the Health Education Section.

## **In-Service Training**

This continued to be a regular and increasing part of the health education programme.

Area Health Education Organisers gave assistance at a Health Visitors In-Service Training Course held at Great Missenden Abbey by the Central Council for Health Education in March.

A series of talks on various subjects were given at Area rallies held by the Home Help Service, the School Meals Service and the Voluntary Committees of the Child Welfare Centres.

In the South Bucks Health Area an advanced Mental Health Course for staff, consisting of three lectures and a final Brains Trust, was held in the early Spring. Film and film strip reviews on topical subjects were held on two evenings for members of this Health Area staff.

During the Autumn, a series of ten lectures was organised for the Workers' Educational Association at High Wycombe on the theme of "Medicine and Health."

To meet the demand in Slough for information about the mouth to mouth method of resuscitation, seven demonstrations were given to Health Department staff and to Youth Groups.

Senior staff of the various sections of the County Health Department, and other Departments where it was considered necessary were informed of all new films and film strips, by means of regular reviews, and about other methods of visual aid such as posters and pamphlets as they were published. To further the service, a series of lecture notes on the more essential subjects is being prepared, giving briefly the main facts, relevant visual aids and recommended reading material.

## **Students and Visitors**

As in previous years, the Nursery Nurse students at the Slough College were given health lectures by the Health Education staff.

Following requests from hospitals in the Aylesbury area, demonstration visits to such places as sewage disposal works, food factories, etc., were arranged for nursing students and nursing cadets.

Once again many visitors were received from overseas, and from other local authorities, who wished to know more about the methods and working of health education in the field.



## **Dental Health Education**

A new development in the teaching of oral hygiene was the appointment (referred to earlier in this report) of a dental auxiliary to work in the South Bucks area, and a comprehensive programme of dental health education in schools was started with the assistance of the Area Health Education Organisers. The amount of teaching on the subject of dental health education was increased in schools in the Wycombe area during the year.

## **Smoking**

Following the publication of the report entitled "Smoking and Health" by The Royal College of Physicians, early in 1962, the need for health education on this subject became more widely realised.

An attempt was made to bring the facts relating to smoking and health to the public generally, and in particular to school children and teenagers.

A poster in the form of a statement from me was printed and circulated, and this was followed by the publication and distribution of 25,000 informative bookmarks through the County Library Service.

After joint consultation with the Chief Education Officer and the teachers it was decided to direct the main part of the programme for school children towards pupils of primary school age, and to reinforce this by education in the secondary school.

Three hundred copies of the report on "Smoking and Health" were provided for distribution to all primary and secondary schools in the County. Notes for teachers in both types of school were prepared, and circulated to schools on request, together with details of all leaflets and posters from various sources. The Health Education Section also offered to advise and assist, where schools wished to arrange small exhibits.

Films and film strips were reviewed and it was decided to make the film strip entitled "To smoke or not to smoke" produced by the American Cancer Society available for use amongst secondary school pupils. No really suitable film strip was obtainable for pupils of primary school age, and so the Health Education Section quickly produced one entitled "A Dangerous Habit." This is now available to teachers in all schools in the County.

At the request of many head teachers, talks were given and discussions stimulated on the subject, in varying types of schools.

To assist in discovering the attitude towards smoking in the age group from 11 years to 18 years, a survey was carried out amongst pupils in the South Bucks area by the Area Health Education Organiser. One hundred and seventeen pupils from secondary schools and the Slough College were questioned verbally on the subject. Interesting points revealed were firstly, more than one-third of the sample of boys smoked daily, and secondly more than half of all pupils had a knowledge of the hazards to health from smoking which had been gained from such media as the television and the press.

To reach teenagers outside schools, all Youth Clubs in the County were advised, through the medium of their bulletins and individual letters, of the services provided by the Department. Since early Autumn the demand for talks on "Smoking and Health" has been steadily increasing.

In addition to talks in schools, youth clubs, and adult organisations a considerable amount of the publicity material provided by the Ministry of Health was distributed to a wide variety of interested organisations.

## SECTION 29.—HOME HELP SERVICE

The demand for the home help service was maintained during 1962, and in fact it kept pace with the increase in the population; the total number of cases receiving help was 2,703, as compared with a total of 2,462 receiving help during 1961. Of the total cases, no less than 1,310 or 48.4 per cent were in the category "old age." The rise in the demand for home help because of old age was to be expected if the general policy of supporting the old folks in their own homes as long as possible is to be followed.

Although there was an increased demand it is with pleasure that I report that at the end of the year there was no waiting list for home help; furthermore, no request for the service during the year had to be turned down because of shortage of staff. There were, however, a large number of cases referred as likely to be in need of home help but an enquiry found, for various reasons, that the service was not required.

### Staff

#### (a) *Administrative*

Because of the increased demand for this service and in particular the need to maintain a high standard of supervision it was found necessary to appoint an additional organiser for duty in the South Bucks Health Area. At the end of the year the administrative staff consisted of the County Home Help Organiser, four Area Organisers, six assistant organisers, five part-time clerks and one full-time clerk.

Approval was given during the year to the installation of telephones in the homes of the Organisers and to the payment of the rents and the cost of official calls. It is thought that this will lead to smoother running of the service.

#### (b) *Other*

At the end of the year there were 487 part-time home helps employed as compared with 462 at the end of 1961.

### Recruiting

Difficulty was again experienced in recruiting suitable home helps in several of the more outlying villages.

In order to try and absolve these difficulties the opportunity was taken when talks on the home help service were being given to various organisations, to emphasise the urgent need for more recruits in rural areas. In addition, attractive posters inviting application for appointment as home helps were, with the co-operation of the Ministry of Labour and the local general medical practitioners, displayed at Labour Exchanges and in doctors' surgeries.

### Problem Families

The scheme for the provision, free of charge, of home help for selected problem families which was approved in 1958 continued during 1962 and in all, eleven families were helped. This was one less than the total number of families helped during the previous year.

Care was taken to ensure that the home helps selected to work in the problem family homes are sympathetic towards this type of case; in this way it was found that the mothers responded more favourably to the offer of help.

Experience of the operation of the scheme emphasises the point that to improve many of the families is a laborious process and that early results cannot be expected.

### Laundry Service for Incontinent Patients

The continued use of this service did much to delay the admission of a number of patients to hospital; it made it somewhat easier to allocate a home help prepared to give continuing help to the incontinent patients remaining in their own homes.

### Good Neighbour Scheme

This scheme was continued and extended during the year; a total of 144 cases being helped by "good neighbours" compared with the total of 102 assisted during 1961.

This part of the Home Help Service has created much interest and we welcomed representatives from several other local health authorities who came along to see how the scheme operates. In view of this general interest, the following brief notes are given as a guide:—

- (i) the scheme is administered directly by the County Council as part of the Home Help Service provided under Section 29 of the National Health Service Act 1946.
- (ii) The majority of cases helped under this scheme are old people living alone; the "good neighbour" is not paid on an hourly basis but rather for the service given.
- (iii) The good neighbour is paired with the person needing help and instead of working set hours may go in to get the patient out of bed, help prepare a meal, see the patient safely to bed in the evening or to do any of the innumerable variety of chores which fall in between these extremes.

- (iv) Weekly payments vary between 10/- and £2; the assessment of the payment to be made is the responsibility of the home help organiser.
- (v) The good neighbour is not required to complete a time sheet; a form certifying that the service has been given is accepted for payment each week.
- (vi) Assessment of the beneficiary is made in accordance with the normal home help assessment scale; in practice, most assessments are "NIL."
- (vii) Although no undue problems have been experienced since the introduction of the scheme, cases are kept under constant review to ensure that the help given and the payments are adequate.

Experience gained in operating this scheme has shown that strong bonds of friendship are forged between the patient and her good neighbour and that after the first two weeks very little supervision of the good neighbours is required; in many cases the good neighbour takes her responsibility so seriously that she treats her patient as a member of her own family.

### Conferences

Four cookery demonstrations were organised for the benefit of home helps, one demonstration being held in each Health Area on the same subject—"How to cook cheap but nourishing food for people with small incomes." There were good attendances at all the demonstrations and much interest was shown. Our thanks are due to the Chief Education Officer and his staff for making it possible for the demonstrations to be staged.

The opportunity was taken during these demonstrations to present a film-strip on the subject of the "Dangers of Smoking."

During the autumn the County Home Help Organiser, three Area Organisers and two assistant organisers attended a weekend conference of Organisers in Cambridge.

### Cases

The following summary gives details of the help provided during 1962 in the various districts:—

AREA	Acute Sick	Chronic Sick	Old Age	T.B.	Maternity	Good Neighbours	Problem Families	TOTAL
<i>Aylesbury Area</i>								
Aylesbury Borough .. ..	29	33	89	—	49	5	1	206
Aylesbury Rural .. ..	20	15	72	—	36	23	—	166
Linslade .. ..	2	1	15	—	10	2	—	30
Wing Rural .. ..	2	8	31	—	11	7	1	60
<i>North Bucks Area</i>								
Bletchley .. ..	29	35	100	—	31	6	—	201
Buckingham .. ..	9	7	28	—	6	13	—	63
Winslow Rural .. ..	2	3	21	—	9	7	—	42
Wolverton .. ..	11	17	94	—	11	7	2	142
Stony Stratford .. ..	5	9	62	—	8	7	1	92
Newport Pagnell .. ..	5	4	34	1	2	3	—	49
Olney .. ..	—	5	14	2	—	4	—	25
<i>South Bucks Area</i>								
Gerrards Cross, Denham and Fulmer .. ..	7	4	21	—	5	—	—	37
Slough and District .. ..	77	122	331	2	57	16	2	607
<i>Wycombe Area</i>								
Chesham .. ..	44	43	125	1	69	7	—	289
Chalfonts, Seer Green and Jordans .. ..	23	8	31	—	39	4	—	105
Amersham Rural .. ..	8	5	14	—	4	8	—	39
High Wycombe .. ..	50	44	146	—	91	15	1	347
Marlow .. ..	7	1	28	—	20	3	—	59
Bourne End .. ..	5	6	20	1	16	5	2	55
Princes Risborough .. ..	7	2	19	—	7	2	1	38
Beaconsfield .. ..	11	2	15	—	23	—	—	51
<b>TOTAL 1962 ..</b>	<b>353</b>	<b>374</b>	<b>1,310</b>	<b>7</b>	<b>504</b>	<b>144</b>	<b>11</b>	<b>2,703</b>
Cases included above carried over from 1961 .. ..	39	202	832	4	8	98	5	1,188
<b>TOTAL 1961 ..</b>	<b>363</b>	<b>412</b>	<b>1,120</b>	<b>6</b>	<b>447</b>	<b>102</b>	<b>12</b>	<b>2,462</b>



## MENTAL HEALTH SERVICE

Considerable progress was made during the year under review in the provision of premises for use in this service. These included:—

January, 1962: purpose-built junior training centre in Aylesbury, replacing the one held in a hired hall.

January, 1962: purpose-built adult training centre in Aylesbury. There had been no adult centre previously.

February, 1962: purpose-built hostel for thirty mentally disordered female residents in Aylesbury.

March, 1962: purpose-built junior training centre in High Wycombe, replacing the one held previously in a war-time decontamination hut.

March, 1962: purpose-built adult training centre in High Wycombe where there had not been one previously.

September, 1962: junior training centre in converted clinic premises in Bletchley. This replaced two small training centres in Wolverton and Thornborough which had been held in hired premises which were quite unsuitable for the purpose. At present, all ages are admitted to this centre which has been divided into two classrooms, one serving the adults and the other juniors. Trainees are kept apart as far as possible and they work under separate supervisors. When the adult centre now being planned is ready, the adults will move out and the centre will revert to its original purpose, namely that of a junior training centre.

November, 1962: five-day hostel (in a converted house) for ten to twelve mentally severely subnormal children, in Aylesbury.

### Official Openings

The Minister of Health, the Rt. Hon. Enoch Powell, officially opened the junior and adult training centre and hostel in Aylesbury on 10th July, 1962. In his speech the Minister referred to his experience with training centres in hospitals and local authorities.

The Chairman of the County Council, Alderman S. W. Lord, opened the High Wycombe junior and adult training centre on 5th December, 1962. He described in his address the developing mental health services in the County and indicated future trends for the care of the mentally subnormal.

### Staff Appointments

In view of the difficulties experienced in appointing suitably trained staff, we have this year introduced trainees into our establishment of mental welfare officers: they will, we hope, in due course qualify to take the social workers' course as recommended by the Younghusband Report. During the training period they work under the close supervision of experienced mental welfare officers.

A similar arrangement has been made for the training centres and three out of five centres now have trainees of sufficiently good educational standard to be eligible for the National Association for Mental Health course for training centre staff.

### Education of Public

In order to make the services known, especially to parents of young mentally handicapped children, we have published a booklet setting out the services available, and providing some simple guidance in the training of mentally handicapped children at home. In addition, the mental health education programme for the public in general has continued.

## ORGANISATION AND STAFF OF THE SERVICES

### Administration

The Mental Health Sub-Committee of the County Health Committee meets quarterly to deal with mental health policy for the whole County and with day-to-day matters for the Aylesbury and North Bucks Health Areas. The Health Area Sub-Committees in High Wycombe and South Bucks deal with their own day-to-day administration.

During the year, the Special Sub-Committee approved five doctors, with special experience in mental disorders, to carry out duties under the Mental Health Act and there are now thirty approved doctors in the County.

Responsibility for the day-to-day administration of the Council's duties under the Mental Health Act is that of a senior medical officer and part-time senior assistant County Medical Officer at the central health department and of the Area Medical Officers in the Wycombe and South Bucks Health Areas.

A senior mental welfare officer is assisted by three area and seven district mental welfare officers and three trainees in the fieldwork of the mental health services in the community. Apart from the senior mental welfare officer, all workers in the field are also welfare officers under the National Assistance Act. The advantage of this arrangement, particularly in rural areas, is that it saves manpower and time and gives each social worker a better overall knowledge of his district.

Good co-operation was maintained with regional hospital boards and hospital management committees. Members of the Mental Health Sub-Committee, area committees and senior medical staff of the department continued to serve on hospital management committees and attend hospital staff conferences, thus maintaining good relationships between the members of staffs of hospitals and local authorities.

### Staff Training

One can hardly speak highly enough of the co-operation we receive from St. John's Hospital where case conferences have continued to play a major part in our in-service training programme. Lectures by psychiatrists dealt with the subjects of "drug treatment," "suicide" and "psychotic children." Several outside speakers were also invited to address the conferences; the consultant geriatrician spoke on the assessment of the needs of elderly people, a general practitioner talked about the mental health services and how they affected him; and a police inspector read a paper on police welfare work and police officers' contact with the mental health services. One of the meetings took place at the new Aylesbury day hospital and the work connected with this type of service was discussed.

Newly appointed officers gained valuable experience by spending some time with the psychiatric social worker on case work at the hospital and by attendance at these case conferences where lectures were followed by case demonstrations, case referrals from the hospital and a review of patients discharged since the previous conference. The practice whereby one mental welfare officer reviews all the cases in his care at each conference was introduced during 1962 and was found to be most useful as it avoids continuation of ineffective work and unnecessary carrying of cases.

In addition to the monthly case conference, St. John's Hospital held weekly conferences for particularly difficult cases; the individual patient attended and the senior medical officer and the mental welfare officer in the patient's area took part in the case discussion. This proved to be useful for clarification of what should, or should not, be attempted in a given patient's after-care. In the South Bucks Area, too, some out-patient sessions were open to the mental welfare officer in the area in order to facilitate closer liaison with hospital staff.

A reciprocal arrangement whereby a student mental nurse accompanies a mental welfare officer on his visits for one day a week to learn about the care of the mentally disordered in the community was brought into operation and was successful.

In order to introduce modern nursery school methods into the training of early entrants to the training centres, it was arranged to exchange a nursery school teacher and a training centre assistant for the period of one month in Aylesbury. In this way, nursery school methods were introduced into the reception class in the centre and proved of great interest to both teacher and assistant. Nursery school methods have been practised in this centre ever since, but it has proved much more difficult to introduce this method in other centres where staff have been trained on more conservative lines.

At the end of the year the staff engaged in fieldwork and those employed in residential establishments and at training centres was as follows:—

<i>Appointment</i>	<i>In post</i>	<i>Vacancies</i>
Senior Mental Welfare Officer .. .. .	1	—
Area Mental Welfare Officer .. .. .	3	—
District Mental Welfare Officers .. .. .	7	3
Trainee Mental Welfare Officers .. .. .	3	—
Psychiatric Social Worker .. .. .	—	1
Hostel Wardens .. .. .	2	—
Hostel Deputy Wardens .. .. .	2	—
Hostel Assistant Warden .. .. .	—	1
Training Centre Supervisors .. .. .	8	—
Training Centre Assistants .. .. .	11	1
Training Centre Trainees .. .. .	3	—
Training Centre Helpers .. .. .	4	—

### Courses

A one-day conference for training centre staff was held at the newly-opened purpose-built centre in Aylesbury. Professor A. D. B. Clarke of the University of Hull spoke on "Constructing Assets



in the Severely Subnormal," a subject of great interest to adult and junior centre staff alike. This was followed by the film "Learning in Slow Motion." In the afternoon the headmistress of the Aylesbury nursery school, which school maintains a very active parent/teacher association, was invited to speak on "Meeting the Parents." She was followed up by the senior medical officer, who talked about the "Problems outside the Class Room." This occasion was also used for an exhibition of teaching material and training programmes in the particular centre.

Various conferences arranged by the National Association for Mental Health were attended during the year by committee members, medical officers, mental welfare officers, members of training centres and the warden.

TRAINING CENTRES

In each centre, annual medical examinations were carried out and new entrants tested for phenylketonuria unless their reaction to the test was known already. Routine dental inspection was also carried out in one centre and it is hoped to extend this service to all centres in the foreseeable future. Mid-day meals were provided at the charge of one shilling to the children by the school meals service in all but the Aylesbury centres, where the adjacent hostel provides the meals.

During the year, the decision recorded under Section 57 of the Education Act 1944 in respect of a child was cancelled and the child transferred to a special school for educationally subnormal pupils.

Enrolments

The following table shows the number of children and adults on the registers of the various training centres at the end of the year:—

	Junior Centres		Adult Centres		Mixed Centres		Centres		TOTAL	
	M	F	M	F	Junior Section M	Adult Section F	Junior Section M	Adult Section F	Juniors	Adults
Aylesbury ..	26	17	16	6	—	—	—	—	43	22
Bletchley ..	—	—	—	—	12	9	12	12	21	24
Chesham ..	—	—	—	—	8	7	4	3	15	7
High Wycombe	20	14	19	7	—	—	—	—	34	26
Slough .. ..	—	—	6*	14*	32	15	1	1	47	22
TOTALS ..									160	101

\*Slough Workshops of the National Society for Mentally Handicapped Children.

No. enrolled .. 261

The table below shows how the number attending training centres has increased since the inception of the National Health Service Act 1946:—

Year	No.	Year	No.	Year	No.
1948	19	1953	67	1958	122
1949	21	1954	78	1959	145
1950	23	1955	84	1960	176
1951	27	1956	103	1961	176
1952	48	1957	108	1962	261

Transport

Of the 261 children and adults attending the various training centres, two travel by train, two by 'bus and nineteen are able to walk there. The remainder are conveyed by special transport involving a maximum of twenty-six journeys per day. The junior centres close during the normal school holidays when transport is reduced to the minimum required to convey the trainees to the adult centres. As an illustration of how the transport has to be planned, three vehicles travelling in different directions are necessary in the High Wycombe area, where there is a dense population, to convey fifty-three trainees to the centres, whereas in the Aylesbury area—where there is a more scattered population—seven different journeys are required for fifty-five trainees. Additionally, a separate journey has to be arranged for children attending the Aylesbury five-day hostel which is an adjunct of the junior training centre. On all routes pick-up and set-down points are arranged wherever possible to avoid calling at individual homes, thus economising on both time and money.



## Activities

Open days were held in all centres. In the four newly-opened training centres the open days followed the official opening in order to give all parents, friends and members of the public, an opportunity to see the activities of these centres; routine was kept as normal as possible. The response was found to be good.

Various organisations invited, and arranged, for trainees to visit the Zoo, Christmas illuminations in London, pantomime, tea parties in village hall and the seaside.

Staff were encouraged to give talks to Women's Institutes and other interested organisations and to invite student nurses and social workers to visit and observe the activities at the centres.

In the two purpose-built adult centres and for the adults in Bletchley, a concentrated effort was made to get factory outwork, but it has proved to be insufficient to keep them employed continuously. The following type of work was found most useful: pasting strawberry punnets, fitting ball-bearings into rubber corks and manufacturing paper carriers. One centre produced mop heads and firewood during periods when no outwork was available and found a ready market for its products. All centres had to fall back on rug-making and the manufacture of baskets, canework stools, cushion covers and Christmas crackers when outwork was not available. Over £100 was earned in this way and repaid to the trainees in weekly pocket money, ranging from 2/- to 15/-. Only in one centre was it possible to pay pocket money continuously. We hope next year to link reward to a definite graded scale, taking into account work efficiency, time-keeping and behaviour. This will be discussed carefully with the trainees by the supervisors and will, we hope, encourage more efficiency and workmanlike behaviour.

## RESIDENTIAL ACCOMMODATION

### Adult Hostel, Aylesbury

A hostel for thirty mentally disordered females was opened on 5th February, 1962. It was planned to admit women who had reasonable expectations of returning to work and living in the community within a year or two. It was soon apparent that if the age range or type of disorder were set within too narrow limits, it would be difficult to find this number in the County, with its scattered population of just over half a million.

In the dormitories the residents are grouped according to their ties of friendship. No dormitory holds more than five. The single rooms, of which there are twelve, are allotted as a reward to those who have made exceptional progress, especially if they maintain work outside and are preparing to go into lodgings or return home. On the whole, however, the girls prefer to be in dormitories and talk over the day's happenings when going to bed. Supervision is easier and the girls seem to be tidier in the dormitories.

The residents were admitted from hospitals and their own homes. Their ages ranged from sixteen to over forty years and the thirty-two admitted by the end of the year were composed of fifteen mentally ill, ten subnormal and seven severely sub-normal. By the end of the year, eight had been discharged for various reasons as shown below:—

#### *Mentally ill :*

- One had obtained a resident post which she did not maintain and returned after two months.
- One had relapsed and returned for further treatment to hospital.

#### *Mentally subnormal :*

- One became pregnant and was admitted to a mother and baby home. (She married subsequently).
- One, whose mother had been a long-standing patient at the mental hospital and whose removal from her home environment, it was hoped, would prevent her developing mental illness, nevertheless showed acute signs of schizophrenia three months after her admission and had to go to hospital for treatment.
- One, who had spent all her life at home and who was admitted at the age of twenty-seven years with the hope of rehabilitating her for work, left the hostel after two days as she disliked domestic work but has subsequently been admitted to our adult centre and lives at home.

#### *Mentally severely subnormal :*

- Two were admitted for observation and assessment as the parents had always maintained that, given a chance in suitable sheltered environment, they could live in the community. One, however, had to be admitted to a psychiatric hospital as she was quite incapable of looking after herself and the other returned home to attend an adult training centre in her area.
- One was discharged to a residential domestic post in the five-day hostel.

Of the twenty-four remaining residents, at the end of the year twelve were in open employment, mainly in laundry work and light engineering; two attended the adult training centre; ten worked in the hostel where good training in laundry, domestic and canteen work is available. The canteen in the hostel also provides the mid-day meals for the adult and junior training centres, i.e. eighty to a hundred meals per day in all. For the work done in the hostel, pocket money in addition to the National Assistance allowance is paid and this varies from 5/- to 15/-.

The goal set before these girls is work and life in the community outside the hostel and it is found that the additional money earned by those working outside is a great incentive to achieve this. Among those in employment are several who have spent years in psychiatric hospitals, in one case as much as twenty years.

It is, however, felt that more time for social work is needed, not only with the hostel residents, but also with their families. Most breakdowns occur after a weekend at home and a whole week spent with families at Christmas proved particularly disturbing. This seems to point to inadequate relationships with the family.

### Five-day Hostel, Aylesbury

The five-day hostel was open for only eight weeks in the period under review. At the end of the year there were six children in permanent places; in addition, three children were receiving short-term care.

### Short-term Care

The number of admissions during the year for temporary residential care (e.g. to relieve the family) is shown in the following table:—

	Under 16		Over 16		Total
	M	F	M	F	
(a) to National Health Service Hospitals ..	22	14	8	5	49
(b) to Local Authority residential accommodation	1	2	—	—	3
(c) elsewhere—private homes .. .. .	2	—	—	—	2
Total ..	25	16	8	5	54

All applications for short-term care were met. Most of the patients admitted to hospital for temporary care are severely handicapped and were already on the waiting list for permanent care.

### Permanent Care

The number of patients on the waiting list at the end of the year for admission to hospital for permanent care is given below:—

	Under 16		Over 16		Total
	M	F	M	F	
(a) in urgent need of hospital care .. ..	13	8	3	4	28
(b) not in urgent need of hospital care .. ..	9	6	6	3	24
Total ..	22	14	9	7	52

The patients on the waiting list, which shows an increase of eleven since last year, are either completely helpless cot cases or, if mobile, suffer from additional physical handicaps.



## Registered Homes

The following private homes are registered in this County under the Mental Health Act, 1959:—

<i>Description</i>	<i>Name</i>	<i>Registration</i>
Nursing Home	Hitcham Place, Burnham.	Registered for 30 mentally ill, senile female patients.
Residential Home	Lynwood, Woburn Sands.	Registered for 6 severely subnormal adult male patients.
Residential Home	Mount Tabor, Wingrave.	Registered for 7 severely subnormal female adults and 12 severely subnormal girls aged 5—16.
Residential Hostel and Workshop	National Society for Mentally Handicapped Children, Slough.	Registered for 30 mentally severely subnormal patients (15 male, 15 female).

## VOLUNTARY ORGANISATIONS

### Buckinghamshire Voluntary Association for Mental Welfare

The work of the Association continued throughout the year. The Annual General Meeting, held in June, 1962, in Aylesbury, under the Chairmanship of Mr. N. W. Gurney, C.B.E., J.P., C.A., Chairman of the County Council, was addressed by Dr. D. C. Watt, Medical Director of St. John's Hospital, on "The Cure for Mental Illness." Dr. Watt spoke of the difficulties which arose when the cure of mental illness was compared with the cure of physical illness. Some patients returned to their homes whilst retaining some of their symptoms and although these were not of the degree which would require the patient to be kept in hospital, their presence at home could put a tremendous burden on the family and support for the relatives in this situation was very important. The part played in the Mental Health Services by general practitioners, local authorities, psychiatric hospitals and voluntary organisations was discussed.

The Association is able to contribute to this support in a small way by assisting families materially, by its home tuition scheme and by a social club in Aylesbury. Fifty-five grants were made for assistance to cases where help from statutory sources was not available. These included grants towards cost of holidays, for clothing and for equipment on loan. In addition, food parcels and gifts were distributed at Christmas time.

The extension of the Council's training centre facilities has led to a further reduction in the number of cases visited by home teachers under the Association's scheme for training mentally subnormal patients at home and at the end of the year one man and three women were being visited by home teachers of the Association. It is realised that attendance at a centre is a more appropriate form of training but when this cannot be arranged and a suitable home teacher can be found, the Association will, at the request of the County Council, continue to provide home tuition.

The special 'bus to enable relatives from the Aylesbury, Amersham and High Wycombe areas to visit patients in Borocourt, continued monthly and was used by three hundred and nine passengers.

The social club, led by one of the Council's mental welfare officers and assisted by voluntary helpers, met in Aylesbury every week. The Association gave financial support to this club which enabled its members to form social contacts which they would otherwise lack. Eighteen women who suffer from varying degrees of mental disorder, but work in the community or attend the training centre, met regularly and had occasional outings.

### Slough Group of the National Society for Mentally Handicapped Children

The Slough Group of the National Society for Mentally Handicapped Children continued to run a very successful friendly club in their area where twenty-six members met weekly in a hired hall. Members of the group had, however, acquired a new building at the end of the year for this purpose and hope to extend their activities and meet more frequently in future.

### National Society for Mentally Handicapped Children

The National Society for Mentally Handicapped Children opened their hostel and sheltered workshop in Slough at the beginning of October. Twenty adults from the training centre in Slough were admitted to the workshop on 15th October. The cost of the transport and the training is borne by the County Council. The hostel caters for cases from all over the country. By the end of this year no cases from Buckinghamshire had been admitted to the hostel.



## PREVENTIVE PSYCHIATRY

This scheme, which was introduced in 1957, continued to flourish and the following reports have been submitted by the psychiatrists concerned:—

### Dr. Edith M. Booth :

“ During the year the sessions for preventive psychiatry were, as in former years, used as a means of making more widely known the general principles underlying the promotion of sound mental health. Each year sees the development of new techniques for the prevention of mental illness and the promotion of mental health. It is noteworthy that progress in this important field has been such that, in August, the International Association for Child Psychiatry and allied professions was able to hold, in Holland, a five-day Congress dealing with Primary Prevention of Mental Disorder in Children. Dr. Mildred Pott, my ‘ opposite number ’ in Slough, and I both attended this.

I continued to hold regular discussion groups and consultations about individual cases with the health visitors in Aylesbury, Bletchley and Wolverton and with child care officers and house parents in the Aylesbury district. The discussion groups were run on the lines which we have found successful in previous years and I now have little doubt that this kind of teaching is best done by organised lectures. The well-observed, well-documented case record which lends itself to discussion, is a particularly good method of teaching students undergoing in-service training.

It is pleasing to record that during the year the scope of preventive psychiatry in the County was extended to include another group whose daily work brings them into contact with families which are trying, often in a mentally unhealthy and therefore unsuccessful way, to cope with stressful situations. In the early part of the year I held four sessions consisting of general talk, followed by discussion, with an in-service training group of workers from the County Health and Welfare Department. This mixed group included, amongst others, mental welfare officers, home help organisers, home teachers of the blind and a teacher of occupational therapy in an old people’s home. Being the first group of its kind in the County, my approach to its members was admittedly of a somewhat experimental nature: it is an experiment which I would like to repeat with some variations suggested by experience. I hope that the members of the group were able to learn at least as much as they taught me for if, as is sometimes felt, psychiatrists inhabit an ‘ ivory tower,’ it certainly had to be abandoned by this psychiatrist on those four Friday afternoons. I believe that the various workers concerned became aware that subjects which may at first seem rather intangible and which concern very personal issues can be discussed and that discussion can lead to a greater awareness of the real needs, especially the psychological needs, of people in difficulties.

Social work, as distinct from charity, involves the worker in helping other people to deal with their problems. All social workers come into contact with both problem families and families with problems—not at all the same thing. I believe that many of the social workers in the group developed an awareness of the difference. To understand a problem is to go part of the way towards solving it or, what is sometimes equally important, to knowing that it cannot be solved.

To understand our patients, or as some prefer to call them, clients, in difficulty, we have to learn to understand ourselves, our own strengths and weaknesses and our own limitations. I feel that group discussions such as the four to which I am referring help us to do this. As always happens in group discussion, the members were surprised to find that when discussing our patients’ feelings, we had perforce to discuss our own. Whilst assessing the weaknesses and strength, personal feelings and idiosyncracies of doctors, nurses and social workers and indeed all those workers in the field who are trying to help the family. I hope that the group acquired some insight into the value of teamwork, as well as its limitations and difficulties.

In addition to the regular discussion groups I gave, during the year, many talks to various members of the community who are interested in the subject of mental health, child development and psychology. These included family doctors, probation officers, policewomen and various women’s organisations, such as mothers’ clubs and young wives’ groups. At some panel discussions, particularly those connected with the Churches, fathers have been well represented. I hope that in the future I shall be given further opportunities of discussion with fathers and father figures (e.g. schoolmasters, male police officers) in the community. The promotion of sound mental health in our children and young people should be the concern of men as well as women. All children and perhaps most of all the fatherless child, can teach us a great deal about the importance of fathers in life.

In November, the Children’s Officer called together a meeting of various personnel from his own and other departments whose work brings them into contact with the unmarried mother and her child. It was a pleasure to be asked to take part in this discussion. One session was all too short for it and I feel that we ought to try to arrange more such meetings.

According to a recent report produced by the Ministry of Health (Monthly Bulletin of Ministry of Health, volume 21), one child in every hundred surviving the neo-natal period, would later be found to suffer from a severely handicapped condition. New methods of medical treatment ensure that many babies born prematurely and with congenital deformities survive as children with handicaps. This fact alone means that for years to come we shall be faced with the problem of how best we can help children with mental and physical handicaps. New techniques will need to be developed and ways devised to make the best use of our limited resources.

As usual, it gives me pleasure to thank my many colleagues in the Health and Welfare Department and the Children’s Department, for their help and interest.”

### Dr. Mildred I. Pott :

“ The session devoted to preventive work has again been used for group discussions with professional workers in the area, and for crisis consultation for adults and children when faced with a death in the family. The scheme was described in the 1961 report and though development is slow we have frequent evidence of the need for such a service, and we continue to explore ways of making it known. We are grateful to the doctors, clergy, health visitors and social workers who are able to make the link between the family in distress and the clinic.

The evening session for older boys and girls, and parents who cannot attend in the day-time is always full. If these facilities could be extended to provide a psychiatric service for adolescents not previously known to the clinic it would be of great value, but this cannot be done with the psychiatric sessions at present available.”

### Hospital Admissions

For observation	(Section 25)	..	..	..	..	127	(152)
For treatment	(Section 26)	..	..	..	..	59	(56)
In emergency	(Section 29)	..	..	..	..	133	(40)
By Order of Court	(Section 60)	..	..	..	..	8	(4)
						<hr/> 327	<hr/> (252)

Corresponding figures for 1961 are shown in parentheses.

Of the eight cases referred under Section 60, three were mentally ill, and five severely subnormal. Of the latter, one was admitted to guardianship, three to psychiatric hospitals and one to Rampton. Section 29 cases may subsequently remain in hospital under Section 25 or as informal patients without being recorded by the local authority. In 1961 there were 252 compulsory admissions while in 1962 there were 327. The reason for the increase is not clear.

### Guardianship

There was at the end of the year a total of nine cases under guardianship. It was found that some patients, although suitable for guardianship, could be cared for informally.

### Visits and Interviews by Mental Welfare Officers

The visits made and interviews given by mental welfare officers during the year are set out below:—

Mentally Ill			Subnormal and Severely Subnormal		
Interviewed at office	Visited at home	Total	Interviewed at office	Visited at home	Total
360	2,058	2,418	193	2,142	2,335

### Home Training

In addition to the four cases being visited by home teachers of the Buckinghamshire Voluntary Association for Mental Welfare, eleven patients received training from the Council's occupational therapists either at their own homes or at the occupational therapy workshops.

### Cases under Care and Cases Referred

Details of cases under care as at 31st December, 1962, and details of those referred during the year are shown in the following tables:—

	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Totals				Grand Total
	Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
(a) Total number of cases involved	—	—	113	155	—	—	—	—	9	3	216	176	130	90	134	136	139	93	463	467	1,162
(b) Attending day training centre	—	—	—	—	—	—	—	—	—	—	1	—	98	62	57	43	98	62	58	43	261
Awaiting entry thereto	—	—	—	—	—	—	—	—	—	—	3	4	3	3	10	10	3	3	13	14	33
(c) Resident in residential training centre	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Awaiting residence therein	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Receiving home tuition	—	—	2	—	—	—	—	—	—	—	1	4	—	—	3	5	—	—	6	9	15
Awaiting home tuition	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(e) Resident in Local Authority home/hostel	—	—	—	13	—	—	—	—	—	—	—	5	5	1	—	6	5	1	—	24	30
Awaiting residence in Local Authority home/hostel	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Resident at Local Authority expense in other residential homes/hostels	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	2	—	—	1	3	4
Resident at Local Authority expense by boarding out in private household	—	—	2	2	—	—	—	—	—	—	—	—	—	—	2	2	—	—	4	4	8
(f) Receiving home visits not included under (b) and (e)	—	—	109	140	—	—	—	—	9	3	211	164	29	25	61	69	38	28	381	373	820

NUMBER OF PATIENTS REFERRED TO LOCAL HEALTH AUTHORITY DURING YEAR ENDED 31st DECEMBER, 1962

	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Totals				Grand Total
	Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
(a) General practitioners .. ..	—	—	84	127	—	—	—	—	—	—	—	—	—	—	—	—	—	—	84	127	212
(b) Hospitals on discharge from in-patient treatment .. ..	—	—	57	65	—	—	—	—	—	—	—	—	—	—	—	—	—	—	57	65	122
(c) Hospital after or during out-patient treatment .. ..	—	—	11	11	—	—	—	—	—	1	—	—	—	—	—	—	—	—	11	12	23
(d) Local Education Authorities ..	—	—	—	—	—	—	—	—	13	5	4	6	17	15	1	2	30	5	8	63	
(e) Police and Courts .. ..	—	1	20	6	—	—	—	—	—	—	2	—	—	—	—	—	—	1	22	6	29
(f) Other sources .. ..	—	—	24	30	—	—	—	—	—	—	5	2	—	5	2	1	—	5	31	33	69
TOTAL ..	—	1	196	239	—	—	—	—	13	5	11	9	17	21	3	3	20	27	210	251	518



## SECTION C.—NATIONAL ASSISTANCE ACT, 1948

### WELFARE SERVICES

#### Welfare Accommodation

Extensions to The Green at Newport Pagnell are being carried out and new Homes are being built at Bletchley and Chesham.

When The Green at Newport Pagnell and the Home at Bletchley are opened, the welfare residents will be transferred from "Serviced accommodation" at Renny Lodge Hospital, Newport Pagnell.

Arrangements are in hand for two Homes to be built in the Slough area, and Winterton House, Wendover, will be re-modelled and extended.

Many voluntary organisations continued to take an interest in the residents of the Homes. These visits were much appreciated by the residents and helped to keep them in touch with outside events.

It will be seen from the statistics given later in the report that the demand for welfare accommodation continued to grow and that the waiting list continues to grow although much new accommodation is being provided.

#### Statistics

The following table shows the number of persons in accommodation provided in accordance with Part III of the National Assistance Act, 1948, on the 31st December, 1962:—

	MALES	FEMALES	TOTAL
(i) Homes provided by the Council .. ..	86 (92)	218 (197)	304 (289)
(ii) Serviced accommodation .. ..	99 (96)	29 (28)	128 (124)
(iii) Homes provided in conjunction with Bucks Old People's Welfare Committee ..	8 (9)	54 (50)	62 (59)
(iv) Katherine Knapp Home for the Blind ..	6 (6)	15 (15)	21 (21)
(v) Homes provided by voluntary bodies and other local authorities .. ..	65 (54)	119 (105)	184 (159)
(vi) Temporary accommodation for evicted families .. ..	7 (18)	7 (15)	14 (33)
Totals .. ..	<u>271 (275)</u>	<u>442 (410)</u>	<u>713 (685)</u>

The number of persons awaiting admission to accommodation on the 31st December, 1962, was :—

Males .. ..	119 (112)
Females .. ..	219 (201)
Total .. ..	<u>338 (313)</u>

Admissions to welfare accommodation during the year were as follows :—

Permanent admissions to Council's homes, etc. .. ..	215 (189)
Holiday admissions .. ..	100 (92)
Periodic admissions .. ..	52 (41)
Temporary admissions .. ..	10 (25)
Permanent admissions to homes provided by voluntary bodies, etc. ..	44 (49)
Total .. ..	<u>421 (396)</u>

In all the above tables the corresponding figures for the previous year are shown in brackets.

#### Chiropody

The year 1962 was of special interest, being the first full year in which the direct chiropody service operated. No major difficulties arose although the arrangements have remained virtually unchanged since their commencement on the 1st June, 1961.

Treatment continued to be available under these arrangements to women over 60 and men over 65 years who receive a supplementary allowance from the National Assistance Board; to registered blind persons; expectant mothers; and certain physically handicapped persons. The scheme was slightly extended from the 1st October, 1962, to enable expectant mothers to receive free treatment for three months, making six months in all after confinement.

Treatment for persons resident in their own homes is provided by chiropodists in private practice, where this is recommended by the family doctor.

The full-time chiropodist resigned in June, 1962, and it had not proved possible to fill the vacancy by the end of the year.

The following tables give details of chiropody services provided for persons resident in their own homes during the year:—

Number of persons treated .. .. .	1,672
Number of new patients who received their first treatment during the year (included in above) .. .. .	721
Treatments given at chiropodists' surgeries .. .. .	5,090
Treatments given at patients' homes .. .. .	2,913
Dressings (when no treatment given) .. .. .	90
Failed appointments .. .. .	209
Chiropodists employed at 31st December, 1962:	
Whole-time .. .. .	Nil
Under Contract .. .. .	36

**Problem Families**  
**Co-operation between the Welfare Authority and Local Housing Authorities**

By the end of 1962 seven housing authorities had agreed to the inclusion of suitable tenants in the guaranteed rent scheme during the year.

This scheme is intended to safeguard the tenancy by giving such authorities some measure of protection against the accumulation of excessive rent arrears whilst the County Council's welfare officers attempt to persuade the families to meet their responsibilities.

Close co-operation has been maintained between the County Council and the housing authorities concerned, and frequent case conferences were held to co-ordinate the social work necessary and to discuss special problems.

In all cases accepted under the scheme there were children involved who would almost inevitably have become the responsibility of the County Council if the housing authority had exercised their right to obtain possession of the house for non-payment of rent.

Three other authorities, who had not chosen to use the guaranteed rent scheme, nevertheless referred to the County Council those tenants whose rent was seriously in arrears before taking action to obtain possession of the property. These tenants were dealt with on similar lines to those included in the scheme.

The following table shows the number of adults, and children under school leaving age, who were involved in cases receiving attention on the 31st December, 1962:—

	<i>Families included in Guaranteed Rent Scheme</i>		<i>Other Families</i>	
	MALES	FEMALES	MALES	FEMALES
Number of Adults	16	18	33	40
Number of Children		96		166

**Meals on Wheels**

During the year, 32,099 meals were supplied by the Women's Voluntary Service, compared with 26,616 in 1961. The cost of the subsidies was £1,205 14s. 3d.

More meals were being supplied in existing areas and the scheme was extended to the Stony Stratford and Wolverton districts.

Some equipment has been supplied for the delivery of meals.

Travelling expenses, amounting to £312 5s. 6d. were paid to helpers, as against £269 5s. 0d. in the previous year.

The opportunity was taken during 1962 to arrange for some 257 old persons receiving the "meals on wheels" service to be visited in their own homes by health visitors in order to find out whether they required other domiciliary and welfare services.

Of these 257 cases, 127 were already known to health visitors, 115 were being visited by relatives, 86 were being visited by others, 119 were receiving home help, 30 were receiving home nursing, whilst 44 were in receipt of National Assistance benefits.

The health of 140 of the old folk receiving "meals on wheels" was said to be "fair," 75 were in "good health" and the remainder were found to be in "poor health."

In 34 cases, i.e. about 14% of the total, it was found that further assistance was required, this total being made up of persons requiring the following:—

Home help .. .. .	10
Appliances .. .. .	6
Clothing .. .. .	4
Wireless .. .. .	1
National Assistance .. .. .	1
Assistance from almoners .. .. .	2
Assistance from welfare officer .. .. .	1
Help in shopping .. .. .	1
Social visits .. .. .	1
Extra fuel .. .. .	1
Chiropody .. .. .	1
Admission to old persons' homes .. .. .	3
Dental treatment .. .. .	1
Financial help .. .. .	1

This once again emphasises the need for old people to be visited regularly by health visitors or other social workers who understand their particular needs.

### Physiotherapy

Physiotherapy continued to be given to residents in the Council's Old Persons' Homes and is of considerable assistance in preserving their physical independence. During the year, 144 residents had 4,832 treatments between them. These were made up as follows:—

Exercise .. .. .	1,964
Heat Treatment .. .. .	1,356
Faradism .. .. .	205
Massage .. .. .	1,134
Wax Treatment .. .. .	173

### Protection of Property

The discharge of the Council's functions relating to the protection of the property of hospital patients and residents of old persons' homes continued throughout the year.

The proportion of cases where the persons concerned owned, or had a life interest in, their home address increased, as also did the cases of persons living alone and having a tenancy of their home address.

These latter cases present particular problems involving as they do the undesirability of houses remaining unoccupied for lengthy periods where the patient is unlikely ever to return, and the often strong determination of the patient to continue to occupy the premises (and thus keep their belongings together) for as long as financial and other circumstances allow.

It is always a momentous, and often a sad and reluctant decision for a patient to authorise the disposal of furniture and effects and the sale, or surrender of the tenancy, of their home.

In some of these cases where the person was unable to act through mental disorder, it became necessary to apply to the Court of Protection for the appointment of a Receiver so that the matter could be dealt with.

If a suitable relative or friend was unable or unwilling to act, my Chief Administrative Officer was usually appointed Receiver.

### Co-operation between Welfare Authority and Regional Hospital Board

Dr. Leopold Wollner, Consultant Physician in Geriatrics, appointed jointly by the County Council and the Oxford Regional Hospital Board, kindly submitted the following report:—

“ The joint appointment of the Geriatric Physician with the County Council and the Regional Board has now been in operation in this area for several years, and during this period the geriatric hospital and Local Authority Services have been developed. There has now been sufficient experience to state with confidence that this arrangement forms the most satisfactory method of providing a comprehensive geriatric service. A medical and social assessment is made prior to admission in every case irrespective whether the initial application is made to the geriatric department at hospital or the welfare department of the Local Authority. After-care is provided



for all patients discharged from hospital by a social worker of the Local Authority, and in this way continuity of care is assured. Hospital accommodation is provided for investigation, treatment, or nursing care only; Part III residential accommodation is provided for those in need of care and attention, but who do not require admission to hospital. Transfers between hospital and Part III accommodation can be made without delay, and full use is made of welfare as well as hospital beds.

### **Hospital Services**

There is still a considerable shortage of hospital beds and limited rehabilitation facilities. The present number of geriatric beds in the Aylesbury/Amersham/High Wycombe area is 0.97/1000 of population, which is far below both the national average (1.2/1000) and that in other areas in the Oxford Region. There is also a very serious shortage of beds for long stay, mentally disturbed, elderly patients in the mental hospital. This places an additional strain on the very limited number of hospital beds available in the geriatric department. A new geriatric unit is in an advanced stage of planning at Amersham General Hospital but this will not allow for an increased number of beds. There is, therefore, an urgent need for more geriatric beds suitable for active treatment and rehabilitation, both in the Aylesbury and in the Amersham/High Wycombe areas. Day patient attendance at the hospital is still not available because of lack of accommodation and this is urgently needed.

The number of admissions for the year 1962 in the Aylesbury/Amersham/High Wycombe area was 1,105, a rise of 38 over the admissions for 1961 (1,067). The number of patients referred to the geriatric department in 1962 was 1,584 and the number of domiciliary visits and out-patient attendances showed a further increase.

### **Welfare Services**

The waiting list had at 31st December, 1962, risen to 338, a rise of 25 over 1961 (313). The policy whereby applicants are graded according to need and priority continued and urgent cases were admitted immediately; the priority for admission was re-assessed frequently. Temporary admissions, periodic admissions and holiday admissions continued to prove helpful. It is becoming increasingly apparent that an independent assessment unit would be of great value. Elderly people could be admitted to this unit both from home and from hospital. In this unit their suitability in respect of daily living and need for domiciliary services in their own home could be assessed; in a similar way assessment could be made of their suitability and need for Part III residential accommodation. Such a unit should be sited at the main district general hospital where full diagnostic and rehabilitation facilities are available, but residents would not require nursing care.

There were 215 admissions to Part III accommodation during 1962; 95 came from home, 120 came from hospital; 158 cases were admitted to hospital from Part III accommodation."

### **Buckinghamshire Old People's Welfare Committee**

Mr. R. L. G. White, Honorary Secretary of the Buckinghamshire Old People's Welfare Committee, kindly submitted the following report on the work of the Committee during 1962:—

"Four new Old People's Clubs were opened during the year, making a total of 105 in the County, and the approximate membership is now 16,000.

New Local Committees continue to be formed, and following requests from these Committees, full day Local Courses have again been held and over 200 voluntary workers attended. These Courses have proved that more interest than ever is being taken in old people's welfare, and the Committee has decided to organise further Courses, on a more advanced level, in different parts of the County.

The Local Committees proved their value during the winter of 1961/62, when many additional calls were made on their services, and the Clubs were also kept busy with sick and housebound members.

Our thanks are due to the members of the Bucks Constabulary, who have throughout co-operated with Local Committees in reporting on the needs of the elderly and assisting wherever possible, whilst the Statutory Officers have worked harmoniously with the County Committee, and are represented on all Local Committees."

## **WELFARE OF THE HANDICAPPED**

### **Work of County Medical Social Workers**

During 1962, 1,091 new cases were referred to the county medical social workers. This is an increase of 329 over the 1961 total of 763 new cases. However, the rise in numbers was not as steep as between 1960 and 1961 when the number of new cases referred was more than doubled. It represents,

however, a heavy caseload, as in addition one must take into consideration the 662 old cases brought forward from 1961, making a grand total of 1,753 cases helped during the year.

Who referred all these patients? It is interesting to break down the figures. The two largest sources of referral were hospitals (including chest clinics) and private doctors. They accounted for 40% and 30% of the cases respectively. Public Health and Welfare staff only referred 15% and the remaining cases came from various other statutory or voluntary social agencies, patients' friends and patients themselves, etc. These proportions vary in the different areas. In Slough 51.7% of all referrals were from general practitioners, while in North Bucks, public health and welfare staff were the biggest individual referring group, although they accounted for only 33.9% of the whole number. In High Wycombe, hospital referrals were high at 46.2%. In the Aylesbury area the three main sources of referral (hospital, general practitioner, and public health and welfare staff) were fairly even. It is impossible to say precisely why these differences arise, but each area seems to have its own problems and ways of using and developing a service. It may be that the siting of the office has something to do with it. Personal contact and the ease with which referrals can be made are certainly important factors. General practitioners especially send more patients after they have tried out the medical social work service successfully. Sometimes patients refer others. This is particularly gratifying to their social worker and it is interesting to see how observant and understanding, both about their own needs and others, these patients can be.

Who were the patients and what sort of problems did they bring? The severely and permanently handicapped and the sick elderly were the largest groups (703 and 513 respectively over the whole county), but the shorter term illness, e.g. problems of terminal care, were high too, at 416. Of course, some patients had more than one illness and more than one problem. The severely physically handicapped are sometimes geriatric patients as well. Family problems and non-related as well as related illness are found together. Again, the figures vary for the different areas. Slough had many more physically handicapped persons than geriatric patients, while in the High Wycombe area the medical social worker had more geriatric patients than any other single group. The number of patients with tuberculosis has become very much less. During 1962, individual care committees on three occasions did not have a single case of tuberculosis to consider for help. Figures prepared recently (given below) show strikingly the steady decline of tuberculosis as a problem and the rise of other illness problems. In 1949-50 the Care Committees (excluding Slough figures) spent £461 from Voluntary Funds on helping tuberculous patients and nothing on other patients. By 1961-62 the figures were reversed, £48 for tuberculous patients and £1,366 for patients with other illnesses.

ANALYSIS OF EXPENDITURE ON VOLUNTARY ACCOUNTS

Year	Aylesbury		High Wycombe		North Bucks	
	T.B.	Others	T.B.	Others	T.B.	Others
1949-50	145	—	259	—	57	—
1950-51	314	—	470	—	150	—
1951-52	250	52	463	101	108	14
1952-53	284	57	447	245	93	74
1953-54	186	78	143	206	240	71
1954-55	153	185	154	409	79	150
1955-56	158	175	209	279	111	122
1956-57	104	109	208	365	95	192
1957-58	63	183	113	380	47	196
1958-59	56	106	155	569	60	151
1959-60	35	277	160	811	49	313
1960-61	48	286	73	654	104	274
1961-62	4	367	13	730	31	269
Totals	1,800	1,875	3,027	4,749	1,214	1,826

Cases whose major difficulties were family and general social problems amounted to 9.9% of the work. The medical social workers are finding more problems of this kind being referred to them. While this has not been the primary function of the medical social work service in the County, except where it is part of the total picture of the illness, there are occasions when specialised knowledge and training is necessary and it seems natural that the medical social workers should then be asked to help. It will be interesting to observe whether the group will continue to increase and assume a larger proportion of the medical social workers' time, as some of the problems of the sick and handicapped and elderly are better understood in the community and their needs more easily met by other resources.

The kind of help given ranged widely. The calls on the loan service for nursing and sick room equipment increased enormously and at times put heavy pressure on the stores department. A wide variety of aids for the handicapped and comforts were planned and obtained. House alterations were arranged, television aerial repairs after gale damage paid for, suitable cookers obtained, special flour for children's diets bought—to mention only a few ways in which material help was given. Some families who had got into debt and financial difficulties owing to prolonged and unforeseen



illness needed advice and support. Providing information and advising about private old people's homes and nursing homes was another frequent service given. Holidays for handicapped persons with special problems were again arranged. This year a party of Bucks residents went to the W.V.S. Camp for handicapped persons at Chigwell, Essex, for two weeks. Some 115 cases were accepted and went away to various convalescent homes through the County convalescence scheme.

Other patients have not so much needed material help as wisely handled supporting relationships while they faced personal and family problems and the stress of illness. For all, whether their needs were material or less tangible, the relationship with the social worker, objective yet committed, informed yet undemanding and non-authoritarian, is an important factor in the use they make of the help and community services available.

The Care Committees met at quarterly intervals. Their members showed unflagging interest and concern for the welfare of the cases brought to their notice and sometimes volunteered to raise help or contact new special resources. Every Committee had to face the problem of increased demands on voluntary funds and dwindling income. In another two years the Sunday Cinema Fund will cease altogether. Each area tackled the problem of raising money differently. As the result of individual hard work and resourcefulness, the present state of funds is moderately satisfactory, provided that efforts are sustained and developed to keep level with the multiplying demands.

Changes in the Medical Social Work Section have included the appointment of a social welfare visitor to assist the medical social worker in the High Wycombe area. Mrs. Lambert started work in April 1962. In the Summer, Miss Muscott, social welfare visitor in the Aylesbury office, obtained a place on the two-year course for the National Certificate in Social Work at the North West Polytechnic and was seconded as from September 1962 to take this course. Mrs. Woodhouse has taken her place temporarily in the Aylesbury office.

Mention, too, should be made of the change of name. At the beginning of the year the County Almoners became County Medical Social Workers. This change was made to follow the suggestion of the Council of the Institute of Almoners who had voted in favour of the change. The work done by almoners has long been known as medical social work (there is *no* such word as "almoning") and medical social worker is the internationally accepted name for the professional social worker in the medical setting. Reactions to the change have been varied and many people still use the word "almoner." It seems that both names are not wholly clear and it is surprising how often each has to be interpreted in the terms of the other.

### **In-Service Training**

The In-service Training Course which began in September 1961, continued through 1962 until the end of July. Two of the original participants left the County service during the year. Even at this stage after the course, it is still impossible to assess results with any accuracy. The group ranged widely rather than deeply in their studies. They certainly increased their knowledge of the national social services and the social field in general, as well as of the different sections of the Public Health Department. Inevitably a course like this can only open doors and widen horizons, and this pilot project seems to have done this in some measure.

### **Occupational Therapy**

A total of 445 patients received treatment during the year. This is an increase of 45 as compared with 1961 and coupled with an almost two-fold increase in the number of new cases referred by general practitioners and hospital consultants, shows that the work is re-expanding after the slight reduction due to staffing difficulties last year. Of the 100 patients discharged, 32 were able to resume work or household activities; a satisfactory position when the average age and severity of handicap of the patients is taken into consideration.

The service is primarily one for homebound handicapped persons. This can be overlooked as additional occupational therapy work centres are opened, but there will always be large rural areas which are inaccessible to these centres and in fact not more than 90 patients received their treatment at the three centres situated at Bletchley, Aylesbury and Slough. The Occupational Therapists made 10,331 home visits, 370 visits to Old People's Homes and 36 to the Slough Disabled Men's Club.

It has been possible to provide industrial outwork for a fair number of homebound cases who were judged to derive benefit from this kind of therapy. The majority of patients are, of course, doing craft work but those who have spent their normal working life in factories usually prefer outwork as it more nearly corresponds to normal activity. A great amount of justifiable effort is made to increase the orders for outwork by maintaining contact with those industries which can provide it and ensuring that orders are completed correctly and on time.

The first purpose-built occupational therapy work centre was opened in Slough at the end of March, 1962. There are two large workrooms, capable of accommodating at least 50 patients, which face south with french windows leading to a paved area outside. Weather permitting, patients can easily wheel themselves or walk outside to continue therapy in the open air. In addition, there are three store rooms, a preparation room, office, kitchen and spacious toilets. These and the corridors



have been specially designed to allow patients as much mobility and independence as possible. The access for lorries or vans calling with outwork is planned to allow ample space for unloading and turning.

At the end of the year there were 23 patients on the register. Not all of these were able to attend regularly, due to illness or severity of winter weather. They arrive at 10 a.m. and leave at 4 p.m. with a mid-day break for lunch in the dining room of the new National Society for Mentally Handicapped workshop situated next door. Due to planning and survey of local industry before the centre opened, it was possible to start with a sufficient amount of outwork but it has needed constant effort and investigation of possible new sources to maintain the supply. Systematic breakdown of the job, the making of jigs and aids and the general planning of activity by the Therapist often makes the job very much easier and suitable for partially paralysed and other patients with severe disabilities.

The workrooms at Aylesbury and Bletchley have continued to function smoothly in spite of less favourable accommodation. Forty three patients attended at Aylesbury and nineteen at Bletchley, where the workroom was open two days each week. There are some patients suitable for this kind of therapy who could attend the Aylesbury workroom but cannot be accepted at present due to lack of space in the workroom. In addition to industrial outwork, some suitable work was provided by departments of the County Council.

Homebound patients produced the usual variety of craft work and again it was successfully sold at agricultural shows, the annual sales at the County Offices, the Slough Carnival, the Bletchley Arts Festival and at the Aylesbury market stalls. The willing help given by the W.V.S. and others is much appreciated because patients cannot be expected to go on making articles unless they know a demand for them exists and they receive the stimulus of a small financial reward for their efforts.

**Distribution of Car Badges to Disabled Drivers**

The scheme for the distribution of car badges to severely disabled drivers worked well during the year.

Since its inauguration some 150 badges have been distributed.

No adverse reports have been received from the Chief Constable and, therefore, no suggestions have been made for modifying or changing the scheme.

**WELFARE OF THE BLIND**

**Registration**

The number of registered blind persons on 31st December, 1962, was 791, compared with 746 on 31st December, 1961. During the year under review, 114 new cases were registered and there were 26 inward transfers and one re-registration. Removals from the register for various reasons such as death, left the County, etc., totalled 96.

**Blind Population**

The ages of the blind population in the county at the end of the year are shown in the following table, which is in accordance with the age distribution required by the Ministry of Health:—

0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 & over	Age N.K.	Total
1	—	—	1	2	10	17	15	21	26	49	76	51	55	216	129	83	39	—	791

**Register of Partially Sighted Cases**

The County Council's Scheme approved by the Minister of Health provides that a register shall be kept of the partially sighted. The number of partially sighted cases on the register at 31st December, 1962, was 305, the age classification in the form required by the Ministry being as follows:—

0-1	2-4	5-15	16-20	21-49	50-64	65 and over	Total
—	—	32	12	41	47	173	305

The number on the register at the end of the previous year was 270.

### Observation Register

During the year under review, two cases were certified as blind and at the 31st December, 1962, there were 45 under observation.

### Incidence of Blindness and Partial Sight

The following table gives particulars of the 114 blind and 89 partially sighted cases registered during the year:—

	Cause of Disability					
	Cataract		Glaucoma		Others	
	Blind	Partially Sighted	Blind	Partially Sighted	Blind	Partially Sighted
(1) Number of cases registered during the year .. .. .	35	24	12	14	67	51
(2) Number of cases where treatment was recommended .. ..	25	19	11	10	23	27
(3) Number of cases at (2) above which on follow up received treatment	10	7	6	8	14	16

### Ophthalmia Neonatorum

During the year, three cases of ophthalmia neonatorum were notified, two institutional and one domiciliary. All three made a satisfactory recovery.

### Employment

(i) **Homeworkers.** The Homeworkers' Scheme in the county operated by the Royal London Society for the Blind continued to function well. At the end of the year there were fourteen blind persons in Class A and one in Class B, as follows:—

CLASS A					CLASS B				
Basket Makers	..	..	..	5	Hand Knitter	..	..	..	1
Music Teacher	..	..	..	1					
Machine Knitters	..	..	..	5					
Piano Tuners	..	..	..	3					

There was also one braille copyist included by arrangement in the Scheme operated by the National Library for the Blind.

(ii) **Workshop Employees.** At the end of the year under review there were two female machine knitters and one male basket maker from the County in the London Workshops of the Royal London Society for the Blind.

(iii) **Other Employment.** At the end of the year, 83 blind persons were employed and the following table gives details of their employment:—

<i>Professional, Administrative and Executive Workers</i>					<i>Craftsmen, Production Workers, Labourers</i>				
Teacher	..	..	..	1	Machine Tool Operators	..	..	..	10
Religious Orders	..	..	..	1	Fitters and Assemblers	..	..	..	4
Social Worker	..	..	..	1	Inspectors	..	..	..	2
Proprietors and Executives	..	..	..	2	Packers	..	..	..	5
Journalist	..	..	..	1	Storekeepers	..	..	..	2
<i>Clerical Workers</i>					Carpenter	..	..	..	1
Shorthand Typists	..	..	..	2	Upholsterers	..	..	..	4
Telephone Operator	..	..	..	1	Basket Maker	..	..	..	1
Dictaphone Typists	..	..	..	3	Mat Makers	..	..	..	3
Secretary	..	..	..	1	Chair Seater	..	..	..	1
<i>Sales Workers</i>					Process Workers	..	..	..	16
Representative	..	..	..	1	Labourers	..	..	..	5
Working Proprietor	..	..	..	1	<i>Service Workers</i>				
Shop Assistant	..	..	..	1	Domestic Workers	..	..	..	5
<i>Animal Husbandry</i>					Laundry Workers	..	..	..	2
Poultry Keepers	..	..	..	5	Lift Operators	..	..	..	1

## Placement Service

The Placement Service of the Royal National Institute for the Blind for the placing of suitable blind persons in open industry was well utilised throughout the year.

The blind persons in employment greatly appreciate the contact which the Placement Officers maintain with them during their employment.

## Home Teaching Service

The following is a summary of the work carried out through the home teaching service during the year:—

Total number of visits paid	..	..	10,347
Visits to give instruction in the subjects shown were made as follows:—			
Braille	..	..	71
Moon	..	..	98
Handicrafts	..	..	144

The Home Teachers made 10,034 visits dealing with social welfare of the blind and general administration of the Service.

## General Social Welfare

The general social welfare of blind persons in the County is undertaken by the Buckinghamshire Association for the Blind through its six Divisional Committees. Social Clubs for the blind are organised and held at Aylesbury, Buckingham, Chesham, Wolverton, High Wycombe and Slough. These Clubs are very popular with the blind people and are always well attended. Grants are given from the Association's funds for clothing, fuel, food and holidays. Many types of blind aids are supplied free of charge and handicraft materials at greatly reduced prices.

During the summer, a party of twenty-one blind persons were taken for two weeks' holiday at Clacton to an hotel which had been specially booked for the purpose. A Home Teacher acted as guide and the scheme was so successful that it is to be repeated in 1963.

Many day trips to the seaside and to places of interest were arranged during the year and although the weather was not always kind the outings were greatly enjoyed by the blind.

The Association held four Exhibitions and Sales of handicraft work made by the blind during the year. These were held in conjunction with the Annual General Meeting of the Association, the Bucks County Show, through the kindness of the W.V.S. who allowed the Association to use their shop window in Slough High Street, and the Bletchley Arts Festival.

The time given by members of the Association in arranging and carrying out all this work was greatly appreciated.

## The Katharine Knapp Home for the Blind

During the year under review, the permanent accommodation was well used and at the end of the year there were 21 residents.

Nineteen blind persons from various parts of the County had a holiday at the Home during the year, and the holiday beds were occupied for 38 weeks.

Local organisations continue to take an active interest in the Home and their members visit the residents regularly to talk and read to them, and to give concerts.

This year all the residents were taken on an outing to a bird sanctuary in Bedfordshire which they greatly enjoyed.

## DEAF PERSONS

The Oxford Diocesan Council for the Deaf continued to act as the County Council's agents for work amongst the deaf.

The staff of the Diocesan Council consists of a Chaplain-Superintendent, an Assistant Superintendent/Missioner and three Missioner/Welfare Officers.

There are Social Clubs at Aylesbury, High Wycombe and Slough. The Slough Club is fortunate in having its own premises and these were used practically every day.

There are Friends of the Deaf Associations at Slough and Aylesbury.

Church services are held at Slough, High Wycombe and Aylesbury. The Missioners hold services at Rayner's School for the Deaf at Tylers Green.



Some holidays and sports were organised.

The number of cases on the register at the end of the year was as follows:—

				MALES	FEMALES	TOTAL
Children under 16 years	..	..	..	23	20	43
Persons between 16 and 64 years	..	..		91	70	161
Persons 65 years and over	..	..	..	7	16	23
				<hr/> 121	<hr/> 106	<hr/> 227

The number on the register at the end of 1961 was 217.

The High Wycombe Club for the Hard of Hearing continued to thrive and the County Council made its usual contribution towards the Club expenses.

#### ACCOMMODATION FOR THE HOMELESS

##### Saunderton Hostel

Temporary accommodation for homeless families continued to be available at Saunderton Hostel during 1962 and the Children's Officer, who is responsible for the administration of the hostel has kindly supplied the following information:—

“The hostel has been fully occupied; 17 families were admitted and 21 discharged. On discharge, seven families were re-housed by local housing authorities and 14 found their own accommodation. Six children from five families were received into the care of the Children's Committee as their parents were unable to provide accommodation for them on leaving the hostel.

In all, 27 adults and 60 children stayed at the hostel for periods varying from one day to twelve months.

The Warden reports that things at the hostel have run smoothly and there have been no particular difficulties during the year.”

## SECTION D.—SANITARY CIRCUMSTANCES OF THE AREA

### 1. Water Supply

The Engineer of the Bucks Water Board has kindly supplied the following information:—

“During the year ended 31st March, 1962, the following quantities of water were pumped from the Board’s various sources:—

#### *Chalk Sources*

Bourne End	..	..	..	..	209,314,000 galls.	
Dancers End	..	..	..	..	68,750,000 galls.	
Hampden	..	..	..	..	315,076,000 galls.	
Hawridge	..	..	..	..	361,185,000 galls.	
Marlow	..	..	..	..	345,093,000 galls.	
Mill End	..	..	..	..	330,058,000 galls.	
New Ground	..	..	..	..	507,004,000 galls.	
Pann Mill	..	..	..	..	991,100,000 galls.	
Radnage	..	..	..	..	65,234,000 galls.	
Wendover Dene	..	..	..	..	307,859,000 galls.	
					<hr/>	3,500,673,000 galls.

#### *Greensand Sources*

Battlesden	..	..	..	..	279,485,000 galls.	
Sandhouse, Bletchley	..	..	..	..	308,359,000 galls.	
					<hr/>	587,844,000 galls.

#### *River Source*

Foxcote	..	..	..	..		643,380,000 galls.
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#### *Other Sources*

Ash Hill	..	..	..	..	37,267,000 galls.	
Brackley	..	..	..	..	31,651,000 galls.	
Stony Stratford	..	..	..	..	30,887,000 galls.	
Weston Underwood	..	..	..	..	32,523,000 galls.	
Wycombe Rural Area (Princes Risborough)	..	..	..	..	121,391,000 galls.	
					<hr/>	253,719,000 galls.

Total pumped from all sources	..	..				4,985,616,000 galls.
Add Bulk supply from Birchmoor Source of Birchmoor Water Committee	..	..				135,504,000 galls.
						<hr/>
						5,121,120,000 galls.

The above total quantity can be divided into:—

Supplied within the Board’s area	..	..			4,860,866,000 galls.
Supplied outside the Board’s area	..	..			260,254,000 galls.
					<hr/>
					5,121,120,000 galls.

The total quantity of water supplied by the Board during the year was, therefore, 5,121,120,000 gallons or an average daily quantity throughout the year of 14,030,000 gallons.

Of the 4,860,866,000 gallons supplied within the Board’s area, an analysis can be made as follows:—

Metered Consumption (to Agriculture, Trade and Service Departments)	..	..	..		1,746,981,000
Unmetered Consumption	..	..	..		3,113,885,000
					<hr/>
Total gallons	..	..	..	..	4,860,866,000

During the year much progress has been made on the Board’s Mid Bucks Scheme, which is a major development scheme, the first stages of which are estimated to cost £1,100,000. Trunk mains have been completed and brought into use for conveying water from the Board’s Mill End source at High Wycombe northwards through Princes Risborough and Aylesbury to a new terminal reservoir at Mursley.

Work is now proceeding on the design of the permanent pumping station at Mill End but in the meantime temporary plant has been installed and the Board’s supplies have thus been greatly reinforced.

Loan sanction has been received for the construction of a service reservoir at Winchester Wood near Princes Risborough and it is expected that work will start early in 1963.

Routine mainlaying has continued throughout the year and over 27 miles of new water mains in sizes ranging from 12" to 3" diameter have been laid. The most noteworthy of these new mains is a 12" diameter reinforcement main about 3½ miles in length from Juniper Hill Water Tower northwards across the Wycombe Valley to reinforce supplies in the Hazlemere/Tylers Green area.

Samples of water from consumers' taps and from various sources were collected regularly during the year. The results of these samples indicated that the water supplied by the Board conforms to the high standard of that required from any public supply authority."

## 2. Water Supplies and Sewerage Acts, 1944—1961

The Ministry of Housing and Local Government and the County Council continued to make grants towards the cost of approved Schemes of piped water supply and main drainage in the rural areas of the County. Details of all these Schemes are first submitted to the County Council, whose observations are forwarded to the Ministry.

On 31st December, 1962, the position was as follows:—

29 Schemes of Water Supply	£
(28 schemes completed and 1 scheme under construction) ..	1,551,470
90 Schemes of Main Drainage	
(80 schemes completed and 10 schemes under construction) ..	5,600,018
Total .. ..	<u>£7,151,488</u>

Details of the above Schemes are contained in the Tables shown below.

### SCHEMES OF WATER SUPPLY

Thirty-one schemes of water supply have been submitted, and at 31st December, 1962, the following twenty-nine schemes had reached the stage shown below:—

#### PROGRESS REPORT TO 31st DECEMBER, 1962

Local Authority	Scheme	Total Estimated Cost	Percentage of Scheme Completed
		£	%
Amersham R.D.C. .. ..	Ashley Green } .. .. .	1,667	100
	Chartridge } .. .. .	100	100
	Cholesbury } .. .. .	570	100
	Coleshill (Amended) .. .. .	2,785	100
	Chalfont St. Giles .. .. .	460	100
	Great and Little Missenden .. .. .	370	100
	Latimer .. .. .		
	Penn .. .. .		
Aylesbury R.D.C. .. ..	Haddenham .. .. .	105	100
	Wellwick .. .. .	650	100
Bucks Water Board .. ..	Mid Bucks .. .. .	1,266,000	90
	Brill .. .. .	400	100
	Lower Hartwell .. .. .	790	100
Buckingham R.D.C. .. ..	Buffer's Holt .. .. .	650	100
	East Claydon } .. .. .	1,902	100
	Middle Claydon } .. .. .		
Eton R.D.C. .. ..	Burnham Littleworth Common .. .. .	439	100
	Datchet Ditton Park Road .. .. .	897	100
	Dorney Boveney .. .. .	1,760	100
	Dorney Lake End .. .. .	198	100
	Taplow .. .. .	10,066	100
	Wraysbury Main Scheme .. .. .	55,797	100
	Nursery Lane .. .. .	360	100
	Staines Road .. .. .	3,800	100
Newport Pagnell R.D.C. ..	Birchmoor (Newport R.D.C. share) .. .. .	31,794	100
	East End, North Crawley .. .. .	4,000	100
	Great Linford—Part 1 .. .. .	2,330	100
	—Part 2 .. .. .	4,370	100
	Northern Areas—Water Supply .. .. .	17,450	100
	Moulsoe Link Main .. .. .	4,000	100
	Regional Water Supply Scheme—		
	(a) Main Laying .. .. .	130,760	100
	(b) Reservoir .. .. .	7,000	100
TOTAL		<u>£1,551,470</u>	



# MAIN DRAINAGE SCHEMES

Of the 113 main drainage schemes submitted by Rural District Councils, the following 90 schemes had, on the 31st December, 1962, reached the stage shown below:—

## PROGRESS REPORT TO 31st DECEMBER, 1962

Local Authority	Scheme	Total Estimated Cost	Percentage of Scheme Completed
		£	%
Amersham R.D.C. .. ..	Chalfont St. Giles (Lodge Lane) ..	6,750	100
	Chalfont St. Giles (Gorelands Lane) } ..		
	Chalfont St. Peter (London Road) } ..	4,875	50
	Gt. Missenden (Cockpit Hole) ..	10,100	100
	Holmer Green .. ..	85,250	100
	Little Chalfont (Stages 1, 2, 3) ..	63,859	100
	Link Sewer .. ..	33,021	100
	Newbarn Lane and Three households ..	21,600	80
	Penn .. ..	25,585	80
	Prestwood .. ..	106,000	100
	Relief Sewer .. ..	12,500	100
	Kiln Road, Prestwood .. ..	12,280	100
Aylesbury R.D.C. .. ..	Chilton .. ..	17,539	100
	Dinton .. ..	20,000	100
	Grendon Underwood .. ..	56,000	100
	Hardwick and Weedon .. ..	69,850	90
	Long Crendon (Lower End) .. ..	43,500	100
	Oakley .. ..	41,200	100
	Quainton .. ..	41,070	100
	Shabbington .. ..	13,790	100
	Stone .. ..	15,400	100
	Stoke Mandeville .. ..	36,500	100
	Upper Winchendon .. ..	4,020	100
	Westcott .. ..	8,200	100
	Wendover .. ..	29,450	100
	Worminghall and Ickford .. ..	42,903	100
Buckingham R.D.C. .. ..	Asdstock and Padbury .. ..	73,500	100
	Akeley .. ..	33,000	100
	Marsh Gibbon .. ..	30,500	100
	Tingewick .. ..	20,900	100
	Thornborough .. ..	35,500	100
	Twyford .. ..	53,000	95
Eton R.D.C. .. ..	Burnham (Dropmore Road) .. ..	6,553	100
	Denham (Wyatts Covert) .. ..	1,980	100
	Denham—Stage 1 .. ..	231,843	100
	Denham—Stage 2 .. ..	35,308	100
	Denham—Stage 3 .. ..	65,350	100
	Denham—Stage 4 .. ..	42,500	100
	East Burnham (Crown Lane) .. ..	42,990	100
	Farnham Royal .. ..	168,180	95
	Iver (Iver Lane) .. ..	14,175	100
	Iver (North) .. ..	54,910	100
	Iver (Thorney Lane) .. ..	8,280	100
	Iver (Wood Lane) .. ..	5,415	100
	Middle Green .. ..	26,270	100
	Stoke Poges and Wexham .. ..	507,748	100
Newport Pagnell R.D.C. .. ..	Birchmoor (Newport R.D.C. share) ..	29,724	100
	Bow Brickhill .. ..	20,030	100
	Bradwell .. ..	11,516	100
	Castletorpe .. ..	37,550	100
	Emberton .. ..	24,900	100
	Hanslope .. ..	64,623	100
	Lavendon .. ..	31,560	100
	Loughton and Shenley (Church End) ..	82,000	50
	Ravenstone and Stoke Goldington ..	69,000	50
	Wavendon .. ..	31,573	100
Wing R.D.C. .. ..	Aston Abbotts .. ..	28,600	100
	Cheddington .. ..	12,150	100
	Cublington .. ..	6,070	100
	Dagnall .. ..	16,800	100
	Great Brickhill .. ..	24,500	100
	Great Gap, Ivinghoe .. ..	2,320	100
	Horton .. ..	2,280	100
	Ivinghoe Aston .. ..	9,650	100
	Ledburn .. ..	8,690	100
	Littleworth and Burcott .. ..	31,000	100
	Marsworth .. ..	17,250	100
	Pitstone .. ..	24,150	100
	Rowsham .. ..	8,050	100
	Slapton (Church Road) .. ..	5,550	100
	Soulbury .. ..	30,850	100
	Stoke Hammond .. ..	10,305	100
	Wingrave—Stage 1 .. ..	23,450	100
	Wingrave—Stage 2 .. ..	20,885	100

Winslow R.D.C. .. ..	Drayton Parslow .. .. .	15,800	100
	Granborough .. .. .	31,000	100
	Great and Little Horwood .. ..	29,500	100
	North Marston .. .. .	20,000	100
	Stewkley .. .. .	35,000	100
	Stewkley (North End) .. .. .	5,000	100
	Swanbourne and Mursley .. ..	40,000	95
	Winslow .. .. .	22,200	100
Wycombe R.D.C. .. ..	Downley .. .. .	15,270	100
	Hambleden .. .. .	45,730	100
	Hazlemere .. .. .	34,280	100
	Hedsor and Berghers Hill .. ..	40,150	100
	Hughenden Valley .. .. .	218,000	100
	Princes Risborough .. .. .	14,175	80
	Stokenchurch .. .. .	148,743	100
	Wooburn Valley .. .. .	1,710,000	100
	Wooburn Valley (Tylers Green and Penn)	211,000	100

TOTAL                      £5,600,018

There remains, therefore, a total of 23 approved Main Drainage Schemes yet to be commenced. Several of the Rural District Councils are preparing further Main Drainage schemes for villages, and extensions to existing main sewers, for submission to the County Council.

Engineering Inspectors of the Ministry of Housing and Local Government hold investigations and progress inspections with regard to schemes, and during 1962 the following schemes were visited. In each case the County Health Inspector attended:—

Newport Pagnell R.D.C.—Woughton-on-the-Green Main Drainage Scheme.

Amersham R.D.C.                      —Chenies Main Drainage Scheme.

Eton R.D.C.                              —Horton and Wraybury Main Drainage Scheme.

### 3. Housing

The Ministry inaugurated a Five Year Plan of Slum Clearance in 1955—when Housing Authorities were required to submit proposals for dealing with unfit houses within that period. The position in Bucks is summarised below:—

#### HOUSING AUTHORITIES SLUM CLEARANCE PROPOSALS FOR FIVE YEARS FROM 1955

Housing Authority	Total number of permanent houses in area at 31.12.55	Estimated number of unfit houses	ACTION PROPOSED IN FIRST 5 YEARS			Total number of houses demolished or closed from 1st January, 1955—30th September, 1962
			Number of houses to be demolished			
			Individual houses	Houses in clearance areas	Total number of houses to be demolished	
<b>BOROUGHSH</b>						
Aylesbury .. ..	6,028	35	—	35	35	70
Buckingham .. ..	1,364	52	30	—	30	26
High Wycombe .. ..	12,650	1,408	32	522	554	535
Slough .. .. .	18,500	368	14	354	368	466
<b>URBAN DISTRICTS</b>						
Beaconsfield .. ..	2,520	28	—	28	28	17
Bletchley .. .. .	3,685	106	3	103	106	125
Chesham .. .. .	4,000	137	85	52	137	75
Eton .. .. .	1,146	23	7	16	23	29
Linslade .. .. .	1,214	100	—	10	10	30
Marlow .. .. .	2,007	107	6	101	107	144
Newport Pagnell .. ..	1,525	63	63	—	63	112
Wolverton .. .. .	4,579	261	19	178	197	55
<b>RURAL DISTRICTS</b>						
Amersham .. .. .	13,000	265	265	—	265	230
Aylesbury .. .. .	8,681	314	219	95	314	135
Buckingham .. .. .	2,500	116	14	102	116	107
Eton .. .. .	12,994	264	15	249	264	292
Newport Pagnell .. ..	4,958	188	100	—	100	104
Wing .. .. .	2,792	126	116	10	126	114
Winslow .. .. .	2,531	35	20	15	35	36
Wycombe .. .. .	12,800	430	178	—	178	204
TOTAL .. .. .	119,474	4,426	1,186	1,870	3,056	2,906

The Ministry's Progress Reports on New Housing are cumulative as from April, 1945. The following table shows the progress made by the Local Authorities in Bucks to 31st December, 1962.

**NEW HOUSING—SUMMARY OF PROGRESS TO 31st DECEMBER, 1962**

Local Authorities	PERMANENT HOUSING				Total Permanent Houses Completed
	Local Authorities		Private Builders		
	Under Construction	Completed	Under Construction	Completed	
<b>BOROUGHES</b>					
Aylesbury .. .. .	24	2,726	212	1,806	4,532
Buckingham .. .. .	22	266	19	193	459
High Wycombe .. .. .	69	3,030	160	3,321	6,351
Slough .. .. .	74	3,884	239	3,001	6,885
<b>URBAN DISTRICTS</b>					
Beaconsfield .. .. .	23	491	44	989	1,480
Bletchley .. .. .	120	2,677	81	791	3,468
Chesham .. .. .	31	901	140	1,883	2,784
Eton .. .. .	—	277	2	182	459
Linslade .. .. .	—	280	3	310	590
Marlow .. .. .	9	437	89	859	1,296
Newport Pagnell .. .. .	6	210	60	304	514
Wolverton .. .. .	—	411	87	89	500
<b>RURAL DISTRICTS</b>					
Amersham .. .. .	38	2,060	685	4,727	6,787
Aylesbury .. .. .	24	1,640	75	1,438	3,078
Buckingham .. .. .	10	396	18	194	590
Eton .. .. .	69	2,222	293	3,844	6,066
Newport Pagnell .. .. .	8	568	35	447	1,015
Wing .. .. .	42	716	44	310	1,026
Winslow .. .. .	28	402	56	343	745
Wycombe .. .. .	46	2,186	182	3,913	6,099
TOTAL ..	643	25,780	2,524	28,944	54,724



## SECTION E.—INSPECTION AND SUPERVISION OF FOOD

The Chief Inspector submits the following report for 1962:—

### (1) Food and Drugs (Compositional Quality)

A total of 1,542 samples of food and drugs was procured during the year, and the Public Analyst reported adversely upon 29 of them:

The number of general samples submitted to the Public Analyst was 481, including:—

Almond Marzipan, Angelica, Beer, Beverages, Bread Mix, Buttered Almonds, Cake Covering, Cakes, Cheese, Chicken, Chocolates, Chop Suey, Cockles, Cole Slaw, Coloured Coffee-Sugar, Colourings, Condensed Milk, Cooked Meats, Cooking Oil, Cordials, Corn Oil, Curries, Dehydrated Vegetables, Desiccated Coconut, Egg-Macaroni Shells, Essences, Faggots, Fats, Fish Cakes, Fish Pastes and Preparations, Flavouring, Fresh Dairy Cream, Fresh Fruit, Fruit Filling, Fruit Juice, Fruit Lolly, Ground Almonds, Herbal Tonic, Honey, Ice Cream, Ice Pops, Jams, Jellies, Lancashire Rarebit, Landjaeger, Leberwurst, Meat Pies, Mince Pies, Minced Beef and Gravy, Mussels, Mustard, Noodles, Party Pies, Pastry Mix, Peanut Butter, Peppermint Alcohol, Peppers, Pharmaceutical Preparations, Pickled Cabbage, Pickled Eggs, Pickles, Prawns, Preserves, Preservatives, Processed Peas, Puddings, Reindeer Meat Balls, Salad Cream, Salmon Croquettes, Sauces and Pickles, Sausages, Savouries, Smoked Rainbow Trout Savoury, Soft Drinks, Soups, Spirits, Spreads, Sterilised Cream, Sugar Confectionery, Tinned and Potted Meats, Tinned Fruit and Vegetables, Tinned Shrimps, Tinned Vegetable Juices, Tomato Puree, Trotters, Turkey in Aspic, Turkey Croquettes, Turkey in Pie, Turmeric, Vinegar, White Pepper, Wines, Yeast.

Nine formal samples of milk suspected of adulteration were also sent to the Public Analyst.

In addition, 1,061 informal samples of milk were tested by the Inspectors in the Department's laboratory and found to be genuine or to vary but slightly from the standard laid down by the Sale of Milk Regulations.

A total of 236 informal samples of milk was taken at schools from milk supplied under the Milk-in-Schools Scheme. Samples of milk were also taken at hospitals, children's homes and old persons' homes on behalf of the various committees concerned and all were satisfactory.

The proportion of samples adversely reported upon by the Public Analyst during the last five years has been as follows:—

1958	..	..	..	..	..	..	8.45%
1959	..	..	..	..	..	..	3.97%
1960	..	..	..	..	..	..	3.59%
1961	..	..	..	..	..	..	6.39%
1962	..	..	..	..	..	..	5.92%

There were 6 prosecutions during the year and fines and costs amounted to £185 19s. 0d. Two involved glass in milk; a currant bun contained a piece of wire; a custard tart included a beetle in the filling; a loaf of bread contained dead flies and a sample of haslet was mouldy.

### (2) Food and Drugs Act and Milk and Dairies Regulations (Wholesomeness)

Samples of milk numbering 254, involving 5,568 cows, were taken from farms for guinea pig test to detect the presence of tubercle infection; the same samples were also tested biologically for brucella abortus or brucella melitensis. There were no T.B. results but 14 samples were infected with brucella. The appropriate District Medical Officers were informed of the infections forthwith so that human consumption of the infected milk in its raw state could be prevented.

A further 16 samples were taken from the raw milk delivered to schools under the Milk-in-Schools Scheme. None of these was infected with T.B. or brucella organisms. In addition, 224 samples of "Pasteurised" milk delivered to schools and other County Council establishments were checked, and all but two were found to be satisfactory.

There were 256 samples of "Pasteurised" milk taken from 7 pasteurising plants licensed by the County Council where approximately 11,000 gallons of milk are pasteurised daily. Of these, 3 failed in one way or another to satisfy the requirements.

142 samples of milk were taken on delivery to hospitals. These were tested bacteriologically and for compositional quality, and all were satisfactory.

572 visits were made under the Specified Area Orders which require that only specified grades of milk may be lawfully sold by retail in Buckinghamshire. 716 samples of milk were taken and all were satisfactory. The requirements of the Specified Area Orders continue to be well observed.

## SECTION F.—PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE

### 1. Poliomyelitis

There were no deaths from poliomyelitis during the year; one confirmed case of poliomyelitis (paralytic) was referred, the patient residing in the Borough of Slough.

### 2. Diphtheria

There was no confirmed case of diphtheria during the year and there was no death due to this disease in the County for the fifteenth year in succession.

### 3. General

Information relating to all cases of infectious disease notified during the year are set out in Table (g), of Section H.

## SECTION G.—GENERAL

### 1. Capital Building Works

Good progress was made during the year both in the acquisition of land and the construction of new premises in accordance with the Council's Building Programme.

#### Works Completed

Amersham	—Adaptation of existing premises as Dental Clinic.
Aylesbury	—Mental Health Adult Female Hostel (30 places) and Adult and Junior Training Centres (24 and 50 places respectively). —Adaptation of Private Dwelling as Mental Health five-day Hostel (10 to 12 places). —Radio Control Station for Ambulance Service.
Bletchley	—Adaptations of former Clinic as Mental Health Junior Training Centre (50 places).
High Wycombe	—Mental Health Adult and Junior Training Centres (24 and 50 places respectively).
Slough	—Spastic Unit. —Occupational Therapy Workshops. —Hostel and Workshops for the Mentally Handicapped on behalf of the National Society for Mentally Handicapped.
Steeple Claydon	—Nurse's House, Garage and District Room.

#### Under Construction at 31st December, 1962

Aylesbury	—Four Nurses' Flats, Garages and District Room (Bedgrove Estate).
Bletchley	—Old Persons' Home (40 places).
Buckingham	—Four Nurses' Flats, Garages and District Room.
Chesham	—Old Persons' Home (40 places).
Farnham Royal (Britwell Estate)	—Four Nurses' Flats, Garages and District Room. Child Welfare Centre and Dental Clinic.
High Wycombe (Micklefield)	—Two Nurses' Houses, Garages and District Room by the Wycombe Borough Council for the County Council.
Langley (Parlaunt Park)	—Child Welfare Centre and Dental Clinic. Three Nurses' Flats, Garages and District room by the Slough Borough Council for the County Council.
Newport Pagnell	—Nurse's House, garage and district room.
Wing	—Nurse's House, garage and district room by the Wing Rural District Council for the County Council.

#### Out to Contract at 31st December, 1962

Aylesbury	—Extensions and Stores to Aylesbury Ambulance Station and Headquarters.
Slough (Upton Road)	—Old Persons' Home (40 beds).

#### Proposed Works

Amersham	—Two Nurses' Houses, garage and district room.
Aylesbury	—Old Persons' Home (40 places). —Adaptation of premises for Child Guidance Clinic and Occupational Therapy Workshops.
Bletchley	—Mental Health Adult Male Hostel (30 places) and Adult Training Centre (45 places).
Buckingham	—Ambulance Sub Station.
Chalfont St. Peter	—Ambulance Sub Station.
High Wycombe	—Mental Health Adult Female Hostel (30 places) (Cressex Road). —Adaptation of premises as Child Guidance Clinic. —Adaptations of Clinic to provide two additional Dental Surgeries. —New Main Ambulance Station. —Two Nurses' Houses, garage and district room (Cressex Road).
Long Crendon	—Nurse's House, garage and district room.
Marsh Gibbon	—Nurse's Bungalow, garage and district room.
New Bradwell	—Two Nurses' Houses, garages and district room.
Olney	—Two Nurses' Houses, garages and district room.
Simpson (Nr. Bletchley)	—Adaptation of Private Dwelling as Mental Health five-day Hostel (10 to 12 places).



Slough (Tuns Lane)	—Old Persons' Home (60 beds). Mental Health Junior Training Centre (100 places). Four Nurses' Flats, garages and district room. Additional Smoking Room accommodation at Wexham Court Old Persons' Home.
Stone	—Two Nurses' Houses, garage and district room.
Wendover	—Extension of existing premises to form Old Persons' Home (40 places).

#### Negotiations in Progress at 31st December, 1962

Aylesbury	—Site for future Old Persons' Home (Elmshurst Estate). —Site for Child Welfare Centre (Quarrendon Estate). —Site for Child Welfare Centre (Bedgrove Estate). —Erection of two Nurses' Houses, garages and district room by Aylesbury Borough Council for the County Council (Elmshurst Estate).
Chalfont St. Giles	—Site for one Nurse's Flat in conjunction with Branch County Library.
Chesham	—Site for two Nurses' Houses, garages and district room (Latimer Road).
Lane End	—Site for Nurse's House, garage and district room.
Milton Keynes	—Site for Nurse's House, garage and district room.
Slough (Cippenham)	—Erection of two Nurses' Houses, garages and district room by Slough Borough Council for County Council.
Stewkley	—Site for Nurse's House, garage and district room.

During the year the County Health Committee formulated a Capital Works Building Programme for the period 1st April, 1962, to 31st March, 1972, in accordance with the Ministry of Health Circular No. 2/62.

In accordance with this ten year programme the search for sites suitable for building was intensified and in this connection, many District Councils have agreed, that so far as possible, they will include sites for health and welfare projects within their own development areas.

The co-operation and assistance of District Councils is greatly appreciated.

## 2. Public Health Act 1936

### Registration of Nursing Homes

At the end of the year there was a total of thirteen homes registered by the County Council under the provisions of the Public Health Act 1936; these nursing homes provided in all, 31 maternity and 155 other beds, making a total of 186.

A list of these registered nursing homes is given in Table (b) of Section (H) of this Report.

## 3. Nurseries and Child Minders Regulation Act 1948

In all, nine separate premises were registered (for the reception of 218 children) for the first time during 1962 whilst the registrations of two premises in respect of the reception of a total of 36 children were surrendered.

Twenty-eight daily minders were also registered for the first time during the year. These registrations covering the reception of 195 children. Three registrations, previously approved, were amended to allow for the reception of a further nine children. Two certificates of registration were surrendered by daily minders.

The numbers remaining on the register at the end of the year were as follows:—

	<i>Number registered</i>	<i>Number of Children</i>
Premises .. .. .	20	464
Daily Minders .. .. .	17	587

With the full support of the Chief Fire Officer, to whom I am indebted, arrangements were made towards the end of 1962 whereby any applications for the registration of premises under this Act are, in the first place, referred to the Chief Fire Officer so that he may have the premises inspected. Any recommendations regarding fire precautionary measures made following these inspections are referred to the applicants; thereafter, the applications are only submitted for approval after those recommendations have been completed to the satisfaction of the Chief Fire Officer. In the case of daily minders, taking children into their own homes for minding, health visitors pay routine visits of inspection when they bear in mind fire precautionary advice given by the Chief Fire Officer. If during these visits they meet any difficulty regarding fire risk the matter is referred to the Chief Fire Officer, who arranges for his representative to inspect the homes concerned and to give any advice necessary.

# SECTION H.—STATISTICAL TABLES, ETC.

## (a) LIST OF SANITARY AUTHORITIES

DISTRICT	MEDICAL OFFICER OF HEALTH
URBAN DISTRICTS	
Aylesbury, Borough of .. ..	A. W. PRINGLE, B.A., M.B., B.CH., B.A.O., D.P.H.
Beaconsfield .. ..	R. E. ATKINSON, M.B., CH.B., D.P.H.
Bletchley .. ..	D. H. WALDRON, O.B.E., M.D., B.CH., B.A.O., D.P.H., D.T.M. & H.
Buckingham, Borough of .. ..	D. H. WALDRON, O.B.E., M.D., B.CH., B.A.O., D.P.H., D.T.M. & H.
Chesham .. ..	R. E. ATKINSON, M.B., CH.B., D.P.H.
Eton .. ..	G. M. HOBBS, M.B., CH.B., D.P.H.
High Wycombe, Borough of .. ..	A. J. MUIR, M.B., CH.B., B.H.Y., D.P.H.
Linslade .. ..	A. W. PRINGLE, B.A., M.B., B.CH., B.A.O., D.P.H.
Marlow .. ..	A. J. MUIR, M.B., CH.B., B.H.Y., D.P.H.
Newport Pagnell .. ..	D. H. WALDRON, O.B.E., M.D., B.CH., B.A.O., D.P.H., D.T.M. & H.
Slough, Borough of .. ..	M. A. CHARRETT, M.R.C.S., L.R.C.P., D.P.H.
Wolverton .. ..	D. H. WALDRON, O.B.E., M.D., B.CH., B.A.O., D.P.H., D.T.M. & H.
RURAL DISTRICTS	
Amersham .. ..	R. E. ATKINSON, M.B., CH.B., D.P.H.
Aylesbury .. ..	A. W. PRINGLE, B.A., M.B., B.CH., B.A.O., D.P.H.
Buckingham .. ..	D. H. WALDRON, O.B.E., M.D., B.CH., B.A.O., D.P.H., D.T.M. & H.
Eton .. ..	G. M. HOBBS, M.B., CH.B., D.P.H.
Newport Pagnell .. ..	D. H. WALDRON, O.B.E., M.D., B.CH., B.A.O., D.P.H., D.T.M. & H.
Wing .. ..	A. W. PRINGLE, B.A., M.B., B.CH., B.A.O., D.P.H.
Winslow .. ..	D. H. WALDRON, O.B.E., M.D., B.CH., B.A.O., D.P.H., D.T.M. & H.
Wycombe .. ..	A. J. MUIR, M.B., CH.B., B.H.Y., D.P.H.

## (b) REGISTERED NURSING HOMES

DISTRICT	NAME AND ADDRESS	DESCRIPTION
ADDINGTON .. ..	Seven Gables, Addington .. ..	Maternity, Convalescent, Aged, Infirm.
AYLESBURY .. ..	The Gables, 123 Wendover Road, Aylesbury	Maternity.
BEACONSFIELD .. ..	St. Joseph's, Candlemas Lane, Beaconsfield	Maternity, Acute and Minor Surgical, Medical, Convalescent, Aged, Infirm.
BEACONSFIELD .. ..	Bryn Glyn, Penn Road, Beaconsfield ..	Medical, Convalescent, Aged, Infirm.
BEACONSFIELD .. ..	Rosslyn, Ledborough Lane, Beaconsfield ..	Minor Surgical, Medical, Convalescent, Aged, Infirm.
*BOURNE END .. ..	Fieldhead, Bourne End .. ..	Aged, Infirm.

\*Reserved for Chronic Sick from W.V.S. Residential Clubs for elderly people.

## (c) CHILD WELFARE CENTRES

NAME OF CENTRE	SITUATE	DOCTOR ATTENDS
AMERSHAM (NEW TOWN) .. ..	Community Centre, Woodside Farm, Woodside Road	Thrice monthly
AMERSHAM (OLD TOWN) .. ..	British Legion Hall, Whielden Street .. ..	Monthly
ASTON CLINTON .. ..	Baptist Church Hall .. ..	Do.
AYLESBURY .. ..	The Clinic, Pebble Lane .. ..	Weekly
AYLESBURY—QUARRENDON .. ..	Quarrendon Community Centre, Bicester Road ..	Twice monthly
„ SOUTH COURT .. ..	Church of the Good Shepherd, Church Square, Southcourt .. ..	Twice monthly
„ TRING ROAD .. ..	Limes Avenue Baptist Church, Tring Road .. ..	Do.
BEACONSFIELD .. ..	The Old Rectory .. ..	Weekly
BLEDLOW RIDGE .. ..	Village Hall, Bledlow Ridge .. ..	Twice monthly
BLETCHLEY .. ..	School Clinic, Whalley Drive .. ..	Monthly
„ .. ..	Spurgeon Memorial Baptist Church, Aylesbury Street	Weekly
BOURNE END .. ..	Red Cross Hut, New Road .. ..	Do.
BRADWELL .. ..	Labour Hall, New Bradwell .. ..	Monthly
BRILL .. ..	The Institute .. ..	Twice monthly
BUCKINGHAM .. ..	Congregational School Room .. ..	Monthly
BURNHAM .. ..	Village Hall, Gore Road .. ..	Do.
„ LENT RISE .. ..	Methodist Church Hall, Lent Rise .. ..	Twice monthly
CHALFONT ST. GILES .. ..	Memorial Hall .. ..	Do.
CHALFONT ST. PETER .. ..	Tithe Barn, Swan Farm .. ..	Monthly
CHARTRIDGE .. ..	Village Hall .. ..	Twice monthly
CHESHAM .. ..	The School Clinic, Germain Street .. ..	Monthly
„ POND PARK .. ..	Community Hall, Windsor Road, Pond Park, Chesham	Do.
COLNBROOK .. ..	Parish Room .. ..	Twice monthly
DATCHET .. ..	Village Hall .. ..	Thrice monthly
DENHAM .. ..	Health Centre, Oxford Road .. ..	Monthly
DORNEY .. ..	Village Hall .. ..	Do.
DOWNLEY .. ..	Village Hall .. ..	Do.
EDLESBOROUGH .. ..	Memorial Hall .. ..	Do.
ETON .. ..	Austin Leigh and Baldwin Institute .. ..	Do.
ETON WICK .. ..	Village Hall .. ..	Do.
FARNHAM COMMON .. ..	Village Hall, Victoria Road .. ..	Do.
FARNHAM ROYAL .. ..	Village Hall .. ..	Thrice monthly
FARNHAM ROYAL, BRITWELL ESTATE	1, Wentworth Avenue, Britwell Estate .. ..	Twice weekly
FLACKWELL HEATH .. ..	Community Centre .. ..	Monthly
GERRARDS CROSS .. ..	British Legion Hall .. ..	Do.
GREAT HAMPDEN .. ..	Village Hall .. ..	Do.
GREAT KINGSHILL .. ..	Village Hall .. ..	Do.
GREAT MISSENDEN .. ..	Memorial Hall, Station Approach .. ..	Do.
HADDENHAM .. ..	Village Hall .. ..	No doctor
HALTON (Voluntary) .. ..	R.A.F. Camp, Halton .. ..	Twice monthly
HAMLEDEN .. ..	Parish Hall .. ..	Monthly
HANSLOPE .. ..	Church Institute .. ..	Do.
HAZLEMERE .. ..	Penn Road Methodist School Room .. ..	Do.
HIGH WYCOMBE .. ..	Health Centre, The Rye .. ..	Twice weekly
„ BOOKER .. ..	Castlefield Methodist Church Hall .. ..	Twice monthly
„ MICKLEFIELD .. ..	St. Peter's Church Hall .. ..	Do.
„ SANDS .. ..	War Memorial Hall .. ..	Do.
„ TOTTERIDGE .. ..	Totteridge Social Centre .. ..	Do.
„ WEST WYCOMBE .. ..	Methodist Schoolroom .. ..	Monthly
„ WYCOMBE MARSH .. ..	St. Anne's Church Room .. ..	Do.
HOLMER GREEN .. ..	Village Centre .. ..	Do.
HOLTSPUR .. ..	St. Thomas' Church Hall, Holtspur, Beaconsfield	Do.
HORTON .. ..	Champneys Hall .. ..	Do.
HUGHENDEN VALLEY .. ..	Village Hall .. ..	No doctor
IVER .. ..	Church Institute, Thorney Lane .. ..	Monthly
IVER HEATH .. ..	Village Hall .. ..	Do.
IVINGHOE .. ..	Town Hall .. ..	Twice monthly
KIMBLE .. ..	Stewart Hall, Little Kimble .. ..	Monthly
LANE END .. ..	Memorial Hall .. ..	Twice monthly
LEE COMMON .. ..	Youth Club Hall .. ..	Monthly
LINSLADE .. ..	Forster Institute .. ..	Do.
LITTLE CHALFONT .. ..	Little Chalfont Hall .. ..	Twice monthly
LONG CRENDON .. ..	Old Court House .. ..	Monthly
LOUDWATER .. ..	Recreation Hall .. ..	Do.



**CHILD WELFARE CENTRES—continued**

NAME OF CENTRE	SITUATE	DOCTOR ATTENDS
MARLOW . . . . .	Health Centre, Victoria Road . . . . .	Weekly
MARLOW BOTTOM . . . . .	Village Hall . . . . .	Monthly
MEDMENHAM (Voluntary) . . . . .	R.A.F. Camp, Medmenham . . . . .	No doctor
NAPHILL . . . . .	Memorial Hall . . . . .	Monthly
NAPHILL (Voluntary) . . . . .	Wives' Club, R.A.F. Bomber Command . . . . .	Twice monthly
NEWPORT PAGNELL . . . . .	Congregational Schoolroom, High Street . . . . .	Do.
OLNEY . . . . .	Church Hall, High Street . . . . .	Do.
PRESTWOOD . . . . .	Village Hall . . . . .	Monthly
PRINCES RISBOROUGH . . . . .	Walsingham Hall . . . . .	Twice monthly
QUANTON . . . . .	Memorial Hall . . . . .	Monthly
RADNAGE . . . . .	Cricket Pavilion . . . . .	No doctor
RICHINGS PARK, IVER . . . . .	St. Leonard's Church Hall, Richings Park . . . . .	Monthly
ST. LEONARDS-CUM-CHOLESBURY . . . . .	Village Hall, Cholesbury . . . . .	Do.
SEER GREEN AND JORDANS . . . . .	Baptist School Room, Seer Green . . . . .	Do.
SLOUGH . . . . .	Health Centre, Burlington Road . . . . .	Weekly
„ CIPPENHAM . . . . .	Central Hall, Bower Way . . . . .	Do.
„ LANGLEY VILLAGE . . . . .	Women's Institute Hall . . . . .	Do.
„ LANGLEY ESTATE . . . . .	173, Trelawney Avenue, Langley . . . . .	Weekly
„ ST. MICHAEL'S . . . . .	Slough Social Centre, Farnham Road . . . . .	Do.
„ WEXHAM COURT . . . . .	Wexham Court, Knolton Way, Slough . . . . .	Do.
STEEPLE CLAYDON . . . . .	Library Hall . . . . .	Monthly
STEWKLEY . . . . .	Village Hall . . . . .	Do.
STOKENCHURCH . . . . .	Memorial Hall . . . . .	Do.
STOKE POGES . . . . .	Village Hall . . . . .	Twice monthly
STONE . . . . .	Village Hall . . . . .	Monthly
STONY STRATFORD . . . . .	Scouts Hut . . . . .	Twice monthly
THORNBOROUGH . . . . .	Church Hall . . . . .	Monthly
TWYFORD . . . . .	Village Hall . . . . .	Do.
TYLERS GREEN AND PENN . . . . .	Parish Room, Tylers Green . . . . .	Do.
WADDESDON . . . . .	Village Hall . . . . .	Do.
WELL END . . . . .	Abbotsbrook Hall . . . . .	Do.
WENDOVER . . . . .	Memorial Hall . . . . .	Weekly
WESTON TURVILLE . . . . .	Haig Hall . . . . .	Monthly
WHITCHURCH . . . . .	Methodist Hall . . . . .	Monthly
WING . . . . .	Village Hall . . . . .	Do.
WINGRAVE . . . . .	Temperance Hall . . . . .	Do.
WINSLOW . . . . .	British Legion Hall . . . . .	Do.
WOBURN SANDS . . . . .	The Institute . . . . .	Do.
WOLVERTON . . . . .	Scouts' Hall . . . . .	Weekly
WOOBURN GREEN . . . . .	St. Mary's Church Hall . . . . .	Monthly
WORMINGHALL . . . . .	The Old School . . . . .	Do.
WRAYSBURY . . . . .	Village Hall . . . . .	Do.

**MOBILE WELFARE CENTRE**

(Doctor attends each session)

MONTHLY SESSION	VILLAGES VISITED
First Monday (afternoon) . . . . .	Stoke Goldington, Ravenstone, Filgrave.
Second Monday „ . . . . .	Moulsoe, Milton Keynes, Wavendon, Broughton.
Third Monday „ . . . . .	Great Horwood, Little Horwood, Mursley.
Fourth Monday „ . . . . .	Swanbourne, Drayton Parslow, Newton Longville.
First Tuesday „ . . . . .	Dagnall*, Slapton*, Cheddington, Marsworth.
Second Tuesday „ . . . . .	Castlethorpe, Haversham.
Third Tuesday „ . . . . .	Loughton, Shenley Church End, Stoke Hammond.
First Thursday „ . . . . .	Preston Bissett, Charndon, Calvert.
Third Thursday „ . . . . .	Grendon Underwood, Westcott, Cuddington, Upper Winchenden.
First Friday (morning) . . . . .	Nash, Whaddon, Thornton.
First Friday (afternoon) . . . . .	Bow Brickhill, Little Brickhill, Great Brickhill.
Second Friday (morning) . . . . .	Sherington, Lavendon.
Second Friday (afternoon) . . . . .	Astwood, North Crawley.
Third Friday (morning) . . . . .	Shalstone, Westbury.
Third Friday (afternoon) . . . . .	Leckhampstead, Lillingstone Dayrell, Akeley.
Fourth Friday (morning) . . . . .	Adstock, Padbury.
Fourth Friday (afternoon) . . . . .	Tingewick, Chackmore, Maids Moreton.

\*Alternate months.

(d) POPULATIONS, BIRTH AND MORTALITY RATES FOR THE YEAR 1962

District	Population Census, 1961.	Registrar- General Estimated Population Mid-1962	Crude Birth Rate per 1,000 Population	Crude Death Rate per 1,000 Population	Tuberculosis Death Rate per 1,000 Population	Infant Mortality Rate per 1,000 Births	Neo-natal Mortality Rate per 1,000 Births	Maternal Mortality per 1,000 Live and Still-births
URBAN.								
Aylesbury ..	27,891	29,090	22.0 (639)	8.7 (253)	0.172 (5)	18.6 (10)	11.0 (7)	— (—)
Beaconsfield ..	10,019	10,330	16.7 (173)	9.2 (95)	0.097 (1)	11.6 (2)	— (—)	5.71 (1)
Bletchley ..	17,093	18,290	22.9 (418)	7.6 (139)	0.109 (2)	19.1 (8)	12.0 (5)	— (—)
Buckingham ..	4,377	4,390	19.4 (85)	9.3 (41)	0.228 (1)	— (—)	— (—)	— (—)
Chesham ..	16,236	17,510	23.5 (411)	10.1 (177)	— (—)	19.5 (8)	17.0 (7)	— (—)
Eton ..	3,901	5,450	15.4 (84)	6.6 (36)	— (—)	— (—)	— (—)	— (—)
High Wycombe ..	50,301	52,880	19.8 (1048)	9.3 (491)	0.038 (2)	16.2 (17)	9.5 (10)	— (—)
Linslade ..	4,127	4,310	17.4 (75)	10.2 (44)	— (—)	— (—)	— (—)	— (—)
Marlow ..	8,704	8,930	23.4 (209)	9.1 (81)	— (—)	19.1 (4)	19.1 (4)	— (—)
Newport Pagnell ..	4,722	4,720	16.7 (79)	18.0 (85)	— (—)	— (—)	— (—)	— (—)
Slough ..	80,503	82,700	20.5 (1692)	7.9 (657)	0.048 (4)	13.6 (23)	7.7 (13)	— (—)
Wolverton ..	13,116	12,990	14.5 (188)	15.6 (203)	0.077 (1)	63.8 (12)	47.9 (9)	— (—)
TOTAL URBAN ..	240,990	251,590	20.3 (5101)	9.1 (2302)	0.064 (16)	16.5 (84)	10.8 (55)	0.19 (1)
RURAL.								
Amersham ..	56,565	56,980	19.1 (1086)	9.3 (528)	— (—)	12.0 (13)	8.3 (9)	— (—)
Aylesbury ..	31,331	34,250	18.2 (625)	11.2 (382)	0.029 (1)	16.0 (10)	14.4 (9)	— (—)
Buckingham ..	8,490	9,430	16.1 (152)	9.8 (92)	0.106 (1)	26.3 (4)	19.7 (3)	— (—)
Eton ..	66,914	68,630	18.4 (1261)	8.7 (596)	0.044 (3)	23.8 (30)	17.4 (22)	— (—)
Newport Pagnell ..	14,038	14,130	15.1 (213)	13.7 (194)	— (—)	18.8 (4)	14.1 (3)	— (—)
Wing ..	9,096	9,040	17.8 (161)	12.5 (113)	— (—)	31.1 (5)	18.6 (3)	— (—)
Winslow ..	7,928	7,980	15.4 (123)	18.9 (151)	0.125 (1)	56.9 (7)	24.4 (3)	— (—)
Wycombe ..	50,831	53,100	18.7 (992)	9.5 (507)	0.019 (1)	17.1 (17)	14.1 (14)	— (—)
TOTAL RURAL ..	245,193	253,540	18.2 (4613)	10.1 (2563)	0.028 (7)	19.5 (90)	14.3 (66)	— (—)
TOTAL COUNTY ..	486,183	505,130	19.2 (9714)	9.6 (4865)	0.046 (23)	17.9 (174)	12.5 (121)	0.10 (1)
ENGLAND AND WALES ..			18.0	11.9	0.066	21.4	15.1	0.35

NOTE : In view of the small numbers on which some of the rates quoted are based, the actual numbers are given in parentheses for the purpose of clearer comparison.

(e) COMPARATIVE TABLE OF BIRTH, DEATH AND INFANT MORTALITY RATES FOR TEN YEAR PERIOD, 1953-62

YEAR	BIRTH RATE per 1,000 population.			DEATH RATE per 1,000 population.			INFANT MORTALITY RATE per 1,000 births.					
	Urban.	Rural.	County.	England and Wales.	Urban.	Rural.	County.	England and Wales.	Urban.	Rural.	County.	England and Wales.
1953	15.1	14.8	14.9	15.5	9.4	9.9	9.7	11.4	18.8	21.2	20.0	26.8
1954	15.3	15.9	15.6	15.2	9.1	9.9	9.5	11.3	19.0	25.6	22.4	25.5
1955	15.3	15.5	15.4	15.0	9.5	10.0	9.8	11.7	18.1	21.7	20.0	24.9
1956	15.7	16.8	16.3	15.7	9.5	10.3	9.9	11.7	16.7	17.5	17.1	23.8
1957	16.5	16.9	16.7	16.1	9.5	9.8	9.7	11.5	25.6	17.8	21.6	23.0
1958	17.0	17.6	17.3	16.4	9.9	9.8	9.8	11.7	14.7	18.0	16.4	22.5
1959	17.7	17.5	17.6	16.5	9.6	9.7	9.7	11.6	17.1	19.6	18.4	22.0
1960	19.1	18.2	18.6	17.1	9.7	9.7	9.7	11.5	21.1	18.5	19.8	21.7
1961	19.8	17.4	18.6	17.4	9.1	9.6	9.4	12.0	19.0	17.1	18.1	21.4
1962	20.3	18.2	19.2	18.0	9.1	10.1	9.6	11.9	16.5	19.5	17.9	21.4



(f) CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE ADMINISTRATIVE  
COUNTY OF BUCKINGHAM, 1962.

CAUSES OF DEATH	SEX	Aggregate of Urban Districts.									Aggregate of Rural Districts.									TOTAL.
		0—1	1—	5—	15—	25—	45—	65—	75—	TOTAL.	0—1	1—	5—	15—	25—	45—	65—	75—	TOTAL.	
ALL CAUSES .. .. .	M	56	5	9	16	56	366	344	433	1285	53	8	6	27	46	322	291	537	1290	
	F	28	8	6	1	40	179	217	538	1017	37	7	12	3	33	172	260	749	1273	
1—Tuberculosis, Respiratory ..	M	—	—	—	—	—	4	4	1	9	—	—	—	—	—	4	1	1	6	
	F	—	—	—	—	1	3	—	1	5	—	—	—	—	—	1	—	—	1	
2—Tuberculosis, Other ..	M	—	—	—	—	—	2	—	—	2	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
3—Syphilitic Disease .. ..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	3	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
4—Diphtheria .. .. .	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
5—Whooping Cough .. ..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
6—Meningococcal infections ..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	
7—Acute Poliomyelitis .. ..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
8—Measles .. .. .	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	
9—Other infective and parasitic diseases .. .. .	M	1	—	—	—	—	—	—	2	1	—	—	—	—	—	—	1	—	1	
	F	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1	—	—	1	
10—Malignant neoplasm, stomach	M	—	—	—	—	—	10	12	3	25	—	—	—	—	1	14	6	14	35	
	F	—	—	—	—	1	6	9	12	28	—	—	—	—	—	4	5	11	20	
....., „lung, bronchus	M	—	—	—	—	4	48	31	8	91	—	—	—	—	4	46	23	17	90	
	F	—	—	—	—	1	11	8	2	22	—	—	—	—	—	6	7	5	18	
12— „ „ breast	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	
	F	—	—	—	—	5	14	9	5	33	—	—	—	—	—	21	13	7	41	
13— „ „ uterus	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	2	8	2	3	15	—	—	—	—	3	9	5	8	25	
14—Other Malignant and Lym- phatic Neoplasms ..	M	—	—	—	2	5	44	34	40	125	—	—	—	1	6	30	37	46	120	
	F	—	—	2	—	4	20	23	36	85	—	—	3	1	5	30	29	61	129	
15—Leukaemia, Aleukaemia ..	M	—	—	2	—	1	6	3	4	16	1	1	1	1	—	1	—	1	6	
	F	—	1	1	—	—	3	1	1	7	1	1	1	—	1	1	2	3	10	
16—Diabetes .. .. .	M	1	—	—	—	1	4	1	1	8	—	—	—	—	—	2	1	1	4	
	F	—	—	—	—	—	—	2	7	9	—	—	—	—	2	2	3	9	16	
17—Vascular lesions of nervous system .. .. .	M	—	—	—	—	3	25	28	52	108	—	—	—	—	1	22	24	75	122	
	F	—	—	—	—	2	27	27	103	159	—	—	—	—	2	24	46	143	215	
18—Coronary disease, Angina ..	M	—	—	—	—	7	108	94	76	285	—	—	—	—	9	95	83	103	290	
	F	—	—	—	—	—	20	49	82	151	—	—	—	—	—	21	62	120	203	
19—Hypertension with Heart disease	M	—	—	—	—	1	7	6	9	23	—	—	—	—	—	4	5	11	20	
	F	—	—	—	—	—	1	6	11	18	—	—	—	—	—	2	8	18	28	
20—Other heart disease .. ..	M	—	—	1	—	3	20	27	78	129	—	—	—	2	3	11	24	76	116	
	F	—	—	—	—	2	15	23	117	157	—	—	—	—	2	12	24	125	163	
21—Other circulatory disease ..	M	—	—	—	—	2	6	10	22	40	—	—	—	—	2	11	19	30	62	
	F	—	—	—	—	1	4	9	30	44	—	—	—	—	2	4	6	46	58	
22—Influenza .. .. .	M	—	—	—	—	—	2	1	3	6	—	—	—	—	—	2	1	2	5	
	F	—	—	—	—	—	—	1	3	4	1	—	—	—	—	2	3	4	10	
23—Pneumonia .. .. .	M	7	1	1	1	2	6	11	51	80	8	1	—	—	—	10	13	50	82	
	F	2	3	1	—	1	4	15	40	66	1	2	1	—	—	2	11	70	87	
24—Bronchitis .. .. .	M	1	1	—	—	—	28	45	39	114	1	—	—	—	—	13	21	42	77	
	F	—	1	—	—	1	6	9	18	35	—	1	—	—	1	4	8	22	36	
25—Other diseases of respiratory system .. .. .	M	1	—	—	—	1	5	3	3	13	—	—	—	—	1	6	1	4	12	
	F	—	—	1	—	—	1	1	2	5	—	—	—	—	—	—	1	3	4	
26—Ulcer of Stomach and Duo- denum .. .. .	M	—	—	—	—	1	3	2	5	11	—	—	—	—	—	4	3	8	15	
	F	—	—	—	—	—	—	1	4	5	—	—	—	—	—	2	2	6	10	
27—Gastritis, Enteritis, Diarrhoea	M	—	1	—	—	—	—	2	3	6	1	1	—	—	—	2	2	1	7	
	F	—	—	—	—	—	2	3	4	9	—	—	—	—	—	2	—	5	7	
28—Nephritis and Nephrosis ..	M	—	—	—	—	4	1	1	—	6	—	—	—	—	1	5	—	6	12	
	F	—	—	—	—	1	4	—	4	9	—	—	—	—	1	1	—	1	3	
29—Hyperplasia of prostate ..	M	—	—	—	—	—	3	4	7	14	—	—	—	—	—	1	2	12	15	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
30—Pregnancy, Childbirth, Abortion .. .. .	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	
31—Congenital Malformations ..	M	11	1	—	—	—	1	—	—	13	10	—	—	2	—	—	—	1	13	
	F	12	1	—	—	1	1	—	—	15	10	—	1	—	—	—	—	1	13	
32—Other defined and ill-defined diseases .. .. .	M	33	—	1	1	7	14	17	19	92	37	3	—	2	3	13	11	29	92	
	F	13	2	—	—	6	19	15	39	94	23	2	1	1	6	14	17	67	131	
33—Motor vehicle accidents ..	M	—	1	2	7	6	4	3	2	25	—	1	4	16	6	11	7	2	47	
	F	—	—	1	1	3	1	2	4	12	—	—	2	1	3	3	2	1	12	
34—All other accidents																				
(a) In the home .. ..	M	1	—	—	—	—	1	1	3	6	1	1	—	—	1	2	1	2	8	
	F	1	—	—	—	2	1	1	5	10	—	—	1	—	—	2	2	6	9	
(b) Otherwise .. ..	M	—	—	2	5	3	5	2	3	20	—	—	1	1	7	2	1	3	16	
	F	—	—	—	—	2	4	1	2	9	—	—	1	—	—	1	1	6	9	
35—Suicide .. .. .	M	—	—	—	—	5	9	1	1	16	—	—	—	2	1	7	3	—	13	
	F	—	—	—	—	3	4	—	1	8	—	—	—	—	4	3	3	1	11	
36—Homicide and operations of war .. .. .	M	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	

(g) SUMMARY OF NOTIFICATIONS OF INFECTIOUS DISEASES RECEIVED DURING THE  
YEAR 1962

DISTRICT			Tuber- culosis		Scarlet Fever	Whooping Cough	Diphtheria	Measles	Acute Pneumonia	Meningococcal Infections	Acute Poliomy- elitis		Acute Enceph- alitis		Dysentery	Ophthalmia neonatorum	Puerperal Pyrexia	Smallpox	Para-typhoid Fever	Typhoid Fever	Food poisoning	Erysipelas	Malaria	
			Respiratory	Other							Paralytic	Non- paralytic	Infective	Post infectious										
URBAN																								
1.	Aylesbury Borough	..	7	3	4	6	-	80	5	-	-	-	-	-	6	-	-	-	-	-	-	-	-	-
2.	Beaconsfield	.. ..	4	1	-	-	-	71	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-
3.	Bletchley	.. ..	3	2	6	-	-	427	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-
4.	Buckingham Borough	..	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5.	Chesham	.. ..	2	1	-	-	-	8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6.	Eton	.. ..	1	1	-	1	-	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7.	High Wycombe Borough	..	14	2	11	-	-	25	-	-	-	-	-	-	-	1	1	-	-	-	-	-	2	-
8.	Linslade	.. ..	1	9	9	5	-	88	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-
9.	Marlow	.. ..	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10.	Newport Pagnell	..	-	2	3	-	-	1	-	-	-	-	-	-	-	-	2	-	-	-	-	1	-	-
11.	Slough Borough	..	38	9	7	28	-	191	7	1	1	-	-	-	6	-	13	-	-	-	-	1	6	-
12.	Wolverton	..	-	-	1	-	-	50	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL URBAN		..	74	30	41	40	-	955	16	1	1	-	-	1	14	1	17	-	-	-	2	9	-	-
RURAL																								
1.	Amersham	.. ..	4	4	54	11	-	145	16	-	-	-	-	-	2	-	7	-	-	-	4	1	-	-
2.	Aylesbury	.. ..	8	4	3	11	-	331	5	-	-	-	-	-	5	1	-	-	-	-	1	-	-	-
3.	Buckingham	.. ..	-	-	2	-	-	8	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4.	Eton	.. ..	17	2	5	24	-	173	14	2	-	-	-	1	9	-	45	-	-	-	-	1	-	-
5.	Newport Pagnell	..	1	3	1	-	-	53	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-
6.	Wing	.. ..	-	-	7	-	-	114	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-
7.	Winslow	.. ..	2	-	4	-	-	40	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
8.	Wycombe	.. ..	9	2	9	-	-	64	1	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-
TOTAL RURAL		..	41	15	85	46	-	928	42	3	-	-	-	1	16	1	52	-	-	1	9	3	-	-
TOTAL FOR COUNTY		..	115	45	126	86	-	1,883	58	4	1	-	-	2	30	2	69	-	-	1	11	12	-	-

(h) CARE OF MOTHERS AND YOUNG CHILDREN  
SUMMARY OF DENTAL TREATMENT, 1962

Numbers provided with dental care:—

	Examined	Needing treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers .. ..	92	92	92	70
Children under five years of age .. ..	716	383	309	276

Forms of dental treatment provided:—

	Scaling and gum treatment	Fillings	Silver Nitrate treatment	Inlays and Crowns	Extractions	General Anaesthetics	Dentures provided		Radiographs
							Complete	Partial	
Expectant and Nursing mothers	34	210	10	—	84	12	9	8	22
Children under five years of age	16	436	152	—	129	38	—	—	—



(j) AMBULANCE SERVICE

Statistics for the year 1962

PATIENTS

Stretcher cases	..	..	..	27,784	Emergencies/Accidents	..	..	21,648
Sitting cases	..	..	..	161,258	General Removals	..	..	167,394
Total cases	..	..	..	189,042	Total cases	..	..	189,042

MILEAGE

Ambulances	..	..	..	1,001,659	Vehicle mileage	..	..	1,614,061
Other vehicles	..	..	..	612,402	Rail mileage	..	..	74,729
Vehicle mileage	..	..	..	1,614,061	Total mileage	..	..	1,688,790

RAIL

Patients	..	..	..	769	Mileage	..	..	74,729
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STAFF

VEHICLES

Superintendents	..	..	..	4	Ambulances	..	..	37
Duty Officers	..	..	..	16	Coaches	..	..	3
Head Drivers and Leading Drivers				19	Other vehicles	..	..	21
Driver Attendants and Attendants	..			113				
Total Staff	..	..	..	152	Total vehicles	..	..	61

OTHER INFORMATION

No. of journeys	..	..	..	38,635	No. of Ambulance Stations	..	10
Patients per 1,000 population	..			374	Civil Defence (Ambulance Section):—		
Journeys per 1,000 population	..			76	Instructors	..	22
Average road mileage per patient	..			8	Volunteers	..	362
Average rail mileage per patient	..			97	Training Vehicles	..	4